Student Handbook

2021-2022

Doctor of Medicine Program
Graduate School of Arts and Sciences – Biomedical Sciences
Physician Assistant Program
Academic Nursing Programs

07/01/2021
Vision, Mission, Values and Our Patient and Family Promise

Vision

Wake Forest Baptist Health is a preeminent learning health system that promotes better health for all through collaboration, excellence, and innovation.

Mission

Wake Forest Baptist Health’s mission is to improve the health of our region, state, and nation by:

- Generating and translating knowledge to prevent, diagnose and treat disease.
- Training leaders in health care and biomedical science.
- Serving as the premier health system in our region, with specific centers of excellence recognized as national and international care destinations.

Values

- Excellence—Demonstrate the highest standards of patient-centered care, education, research, and operational effectiveness.
- Compassion—Responsive to the physical, emotional, spiritual, and intellectual needs of all.
- Service—Cultivate selfless contribution for the greater good.
- Integrity—Demonstrate fairness, honesty, sincerity, and accountability.
- Diversity—Demonstrate respect for and inclusion of all backgrounds, identities, experiences, and perspectives.
- Collegiality—Foster mutual respect, facilitate professional growth and mentorship, and reward teamwork and collaboration.
- Innovation—Promote creativity to enhance discovery and the application of knowledge.
- Safety—embrace a culture of reliability through better process design and accountability.

Our Patient and Family Promise

We will:

- Keep you safe.
- Care for you.
- Involve you and your family.
- Respect you and your time.
The information in this student handbook applies to the academic year 2021-2022. **Wake Forest School of Medicine reserves the right to change policies and procedures at any time and without prior notice.** Additionally, errors and omissions in published documents (written or electronic) may be corrected at any time. Students will be notified via email in a timely manner of changes to policy that occur during the academic year. Policy changes may be added as an appendix to the student handbook or the student handbook will be reposted with policy changes included.

Each student is provided with an email account. Wake Health Email accounts are used for official communication. All students are expected to check and respond to email in a timely manner.

Each student is provided with an identification badge. Badges must be worn at all times while on campus. Further details may be found in the [Employee Identification Policy](#).

Effective July 1, 2010, in an effort to create a more fully-integrated structure for the operation of the medical center, an agreement was entered into by and among Wake Forest University (WFU), Wake Forest University Health Sciences (WFUHS), North Caroling Baptist Hospital (NCBH), and Wake Forest University Baptist Medical Center (WFUBMC) under which agreement WFU/WFUHS and NCBH contractually authorized WFUBMC to:

- Govern, through its board, all Medical Center operations and assets (subject to reserved powers or approval of NCBH and WFU/WFUHS on select issues).
- Operate NCBH and WFUHS (including the School of Medicine and its faculty), and their respective subsidiaries and affiliates.

**Policies which apply to Wake Forest Baptist Health (WFBH) clinics, affiliates, and other locations and/or specifically to the Medical Center (WFBMC) are designated as WFBH policies and all faculty, staff and students are required to abide by the policies as noted in each policy.**

**Policies which apply to the education and learning environment and are specific to students enrolled in and/or taking courses as part of the Wake Forest School of Medicine (WFSM) or Graduate School of Arts and Sciences – Biomedical Sciences are designated as WFSM/WFU policies and students are required to abide by these policies.**

The student handbook contains only a subset of policies for students. Additional information is posted on the [Wake Forest Baptist Health PolicyTech site](http://www.wakehealth.edu/PolicyTech/) as well as program specific websites, handbooks, or bulletins. Students who are uncertain about how to access program specific information should contact their program director.

As required by The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, information provided in the Annual Crime and Fire Report may be found at the Medical Center Security Services website: [http://www.wakehealth.edu/Security/](http://www.wakehealth.edu/Security/). This report will be mailed to anyone requesting a copy. Anyone may obtain a copy at Wake Forest Baptist Health Security Administration office located in Meads Hall, Ground Floor, Suite C.
The Wake Forest School of Medicine, inclusive of the Academic Nursing, Physician Assistant (PA), and Undergraduate Medical Educational (MD) programs, and the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences Programs (hereinafter jointly referred to as “School”) are committed to diversity, inclusion and the spirit of Pro Humanitate. In adherence with applicable laws and as provided by School policies, the School prohibits discrimination in its educational programs, admissions, and activities on the basis of race, color, religion, national origin, sex, age, sexual orientation, gender identity and expression, genetic information, disability, and veteran status.

Inquiries regarding nondiscrimination policies should be directed to:

Title IX Coordinator
Section 504/ADA Coordinator
titleixcoordinator@wfu.edu
Reynolda Hall 307
Winston-Salem, NC 27106
336-758-7258

Sarah Riney
Learning Environment Liaison
(Formerly Student Advocate)
sriney@wakehealth.edu
336-713-3352

For information regarding the nondiscrimination policies in employment practices for Wake Forest Baptist Health, see the Equal Employment Opportunity Policy. Information about employment practices may also be obtained by contacting:

Employee Relations:
Peoplelink.wakehealth.edu
336-716-6464

Inquiries concerning the application of anti-discrimination laws may be referred to the individuals listed above or to the Office for Civil Rights, United States Department of Education. For further information on notice of nondiscrimination, visit https://www2.ed.gov/about/offices/list/ocr/index.html for the address and phone number of the U.S. Department of Education office that services your area, or call 1-800-421-3481.
Wake Forest University is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award baccalaureate, masters, and doctorate degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Wake Forest University. Information regarding filing a complaint with SACSCOC may be found at: https://sacscoc.org/app/uploads/2020/01/ComplaintPolicy-1.pdf

The Doctor of Medicine program is accredited by the Liaison Committee on Medical Education (LCME). Graduates of the program are awarded the Doctor of Medicine degree. Information regarding filing a complaint with LCME may be found at: https://lcme.org/contact/complaints/

The Physician Assistant Program is a graduate level program that awards a Master of Medical Science (MMS) degree after 24 months of study. The Wake Forest PA Program is approved by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) for 64 students at our Winston-Salem campus and up to 32 students at our expanded campus at Appalachian State University in Boone, NC. Accreditation for the Boone cohort was granted in September 2013, and the first students enrolled in June 2014. The Boone campus has also been approved by SACSCOC. Information regarding filing a complaint with ARC-PA may be found at: http://www.arc-pa.org/wp-content/uploads/2020/06/Concerns-about-Program-Compliance-with- Policies-or-Standards.pdf

The Nurse Anesthesia Program is a graduate level program that awards a Master of Science (MS) degree. This program is currently on a 10-year accreditation by the Council on Accreditation of Nurse Anesthesia Education Programs (222 South Prospect Avenue, Park Ridge, Illinois 60068; 847-655-1160) with “no progress required” in 2015. This is the maximum accreditation period possible, which is granted to few programs. This program has also been granted full accreditation by the International Federation of Nurse Anesthetists. The WFU Nurse Anesthesia program was the first program in the country, and only the second in the world to receive this level of international accreditation. Information regarding filing a complaint with COACRNA may be found at: https://www.coacrna.org/contact-us/concerns/

The Doctor of Nursing Practice is a graduate level post-master’s program that awards a Doctor in Nursing Practice (DNP). The post-masters DNP program will be offered mostly online. Because most students will be currently working RNs, the post-master’s DNP will be offered as a part-time, 2-year program with online courses and four intensive in person sessions.

The Licensure Division of the University of North Carolina System Office serves as the official state entity to receive complaints concerning post-secondary institutions that are authorized to operate in North Carolina. Information regarding filing a complaint may be found at: https://www.northcarolina.edu/post-secondary-education-complaints/
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Policies for all School of Medicine Programs

Doctor of Medicine, Graduate School of Arts
and Sciences-Biomedical Sciences, Physician Assistant and Academic Nursing

Wake Forest Baptist Health has adopted the AAMC definitions of diversity and inclusion which are:

Diversity

Diversity as a core value embodies inclusiveness, mutual respect, and multiple perspectives and serves as a catalyst for change resulting in health equity. In this context, we are mindful of all aspects of human differences such as socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age.

Inclusion

Inclusion is a core element for successfully achieving diversity. Inclusion is achieved by nurturing the climate and culture of the institution through professional development, education, policy, and practice. The objective is creating a climate that fosters belonging, respect, and value for all and encourages engagement and connection throughout the institution and community.

The following statements are specific to Wake Forest School of Medicine and Wake Forest Baptist Health:

- We believe that diversity and inclusion are integral to achieving excellence and quality health outcomes for all.
- We believe that achieving the mission of the Medical Center requires the creation and maintenance of a work and educational environment that embodies diversity and inclusion.
- We believe in the unlimited value of a diverse workforce at all levels of our Medical Center.
- We embrace the definition of the Association of American Medical Colleges (AAMC) for diversity, including the recognition that diversity is not limited to race and ethnicity, but must also take account of socioeconomic status, sexual orientation, religious commitment, physical ability, and all of the experiences that enrich our lives.
- We believe that in order to eliminate the pervasive health disparities that exist in our region and country, we must recruit, retain, and train a diverse cadre of faculty, staff, and trainees.
- We believe that our educational programs should enable health care professionals to provide culturally competent care and address health disparities.
- We believe our Medical Center should actively engage with our local and regional communities to advance health equity.
**Ethical Behavior**

**General Policy Statement**

It is the policy of Wake Forest Baptist Health (WFBH), (which includes Wake Forest Baptist Medical Center, North Carolina Baptist Hospital, Lexington Medical Center, Davie Medical Center, Wilkes Regional Medical Center, High Point Medical Center and other clinical subsidiaries/affiliates), Wake Forest University Health Sciences, Wake Forest School of Medicine, and Wake Forest Innovations, to encourage its Board of Directors, officers, faculty and staff to engage in ethical behavior in all aspects of business. This includes but is not limited to marketing, admission, transfer, discharge, billing practices, and relationships with other health care providers, educational institutions, and payers.

a) **Scope:** This policy applies to all persons who represent WFBH in their dealings with others, including governing board members, medical staff and other faculty, students, house staff, employees, volunteers, and contract providers and their employees.

**Policy Guidelines:**

a) **Purpose:** The purpose of this policy is to maintain appropriate standards of ethical and legal behavior by providing guidance to all persons who represent WFBH.

b) **Procedure:** WFBH has established a Mission, a Vision, Values, and a Code of Conduct as ethical behavior guides for all persons representing WFBH to follow. Ethical behavior is the responsibility of each employee or agent of the organization. WFBH management and support functions are responsible for providing employees with the necessary information to perform their responsibilities in a way that is both ethical and in accordance with all applicable laws, regulations, and good healthcare/business practices. WFBH has an Audit and Compliance Office to support and monitor the efforts of management, faculty, and staff for compliance.

A. **Mission:** WFBH’s Mission and Mission Statement define the purposes for existence of WFBH.

B. **Vision:** WFBH’s Vision Statement defines how WFBH defines itself as an organization fulfilling its mission and focusing on the future.

C. **Values:** WFBH’s Values are the principles by which WFBH seeks to meet and achieve the Mission and Vision.

D. **Code of Conduct:** The Code of Conduct provides practical actions, examples, and illustrations to guide the performance of our work and interactions to help us ensure that we are working in compliance with applicable laws and regulations. It helps us understand what are and are not appropriate actions for us at work.

E. **Leadership:** The leadership, supervisory, and support staff at WFBH are here to guide faculty and staff in doing their jobs, to provide the tools and information for ethical conduct, and to ensure effective and efficient performance by the employees. Faculty and staff raising compliance or ethical questions or concerns in good faith to leadership, support personnel, or the Audit and Compliance Office are appreciated and must not be subjected to retaliation or retribution.

F. **Audit and Compliance Office:** The Audit and Compliance Office is a resource to actively promote ethical and compliant behavior. The Office works with leadership and support services to evaluate and research compliance concerns and to educate staff on the expectation for ethical behavior, the Code of Conduct, and the overall program for WFBH corporate behavior. The program includes an employee hotline for reporting questions and concerns and should meet all significant requirements of the U.S. Sentencing Commission Guidelines and the Model Compliance Program established by the Office of the Inspector General (OIG) of Health and Human Services (including all updates and supplements).

G. **Guidance and Resources:** The Mission, Vision, Values, and the Code of Conduct require high moral and ethical standards for all WFBH activities. Specific areas requiring accurate information and honest behavior by our employees or agents include, but are not limited to, marketing, admissions/transfers/discharges, billing/collections, patient rights (including suspected victims of abuse or neglect, research subjects, etc.), and the resolution of conflicts. These issues are addressed through WFBH policies.

**WFBH Code of Conduct**

The information on this page is separate from the WFBH Code of Conduct. It contains information that focuses on the student environment at Wake Forest School of Medicine and is intended to supplement the information contained in the Code of Conduct.
From the Code of Conduct:

We maintain a professional environment that supports the development of our trainees and students.

- We support and nurture the development and wellness of our trainees and students.
- We comply with all applicable laws and regulations of our accredited education programs.
- We use the Student Handbook as a guide and resource.
- We are fair and impartial in grading, evaluations, promotions, and grievances, and follow our policies and procedures for addressing concerns.
- We comply with all statutes and regulations that protect the privacy of education records.

Additional Student-Focused Guiding Principles

Respect
- We educate students from a wide range of backgrounds and respect differences in each individual's heritage and goals.
- We are committed to administer all educational activities without discrimination because of race, religion, national origin, age, sex, sexual orientation, veteran status, or disability as required by law.
- We respect the individual choices that students make for career paths.
- We create an atmosphere which encourages learning, characterized by cooperation and respectful relations with the patient population served.
- We deal with professional, staff and peer members of the learning team and health care team in a considerate manner and with a spirit of cooperation.
- We act with an egalitarian spirit toward all persons encountered in a professional capacity, regardless of race, religion, gender, sexual preference, age, disability, or socioeconomic status.

Conflicts of Interest
- We do not permit romantic relationships between faculty/staff and students in which the faculty or staff member has authority or influence over the academic progress of the student.

Confidentiality
- We comply with the Family Educational Rights and Privacy Act (FERPA).
- We avoid discussing the evaluation of a student with individuals not appropriately involved in their education other than as a reference for career opportunities for that student.

Ethical Behavior
- We refrain from knowingly making false statements for the purposes of acquiring financial aid.
- We appropriately attribute research work completed by student(s).
- We comply with the Honor Code as it pertains to each education program and adhere to academic integrity.
Conflict of Interest Related to Student Evaluation/Assessment Policy

1. General Policy Statement:
   Faculty members and other university representatives who provide academic Assessment of Students should be free from conflicting relationships with the students.
   
a) Scope: All Wake Forest Baptist Medical Center (WFBMC) faculty and staff, as well as Third Parties responsible for assessing Students and Students are responsible for complying with this policy.

b) Responsible Department/Party/Parties:
   
i. Policy Owner: Dean, Wake Forest School of Medicine

   ii. Procedure: Program Manager as defined below

   iii. Implementation: Program Manager as defined below

2. Definitions: For purposes of this Policy, the following terms and definitions apply:

   a) WFBMC: Wake Forest Baptist Health and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), all on-site subsidiaries as well as those off-site governed by WFBMC policies and procedures.

   b) Student: any person enrolled in or taking courses in an educational program of Wake Forest School of Medicine

   c) Program Manager of applicable program as follows:

   **Academic Nursing Program:** Program Director
   **Physician Assistant (PA) Program:** Program Director
   **Undergraduate Medical Education (MD) Program:** Associate Dean for MD Program
   **Academic Affairs**
   **Graduate School of Arts & Sciences, Biomedical Sciences Programs:** Dean, Graduate School of Arts & Sciences, Biomedical Sciences
d) Assessment: The systematic use of a variety of methods to collect, analyze, and use information to determine whether a Student has acquired the competencies (e.g., knowledge, skills, behaviors, attitudes) established by and for the Student’s applicable program.

e) Evaluator: For the purposes of this policy, a person who performs an Assessment on a student, and/or who serves on a School of Medicine standing committee(s) or program-specific committee(s) which performs an Assessment on a Student and/or votes on Student acceptance, progress, or promotion (including graduation).

f) Third Party: an individual who is not employed by Wake Forest Baptist Medical Center, but is in a position of performing an Assessment on a Student on behalf of Wake Forest School of Medicine.

g) Immediate Family Member: includes the following individuals

i. Spouse
ii. Child
iii. Parent
iv. Sibling
v. Mother/Father-in-law
vi. Sister/Brother-in-law
vii. Grandparent
viii. Step-parent
ix. Step-sibling
x. Step-child
xi. Member of the immediate household

i) Personal Financial Relationship: a relationship in which the Student receives financial support from the faculty/staff member/Third Party. An exception is permitted when the Student is performing research activities on a grant-funded project.

3. Policy Guidelines:

a) General Requirements/Applicability: Faculty/staff/Third Parties and Students should disclose any conflict of interest, as defined in section 3) b) below.

i. Faculty/staff/Third Parties who serve on a School of Medicine standing committee(s) or program-specific committee(s) which assesses and votes on Student acceptance, progress, or promotion (including graduation) should inform the Chair of the committee(s) on which the faculty/staff/Third Party serves when conflict of interest exists and recuse themselves from participating in the assessment of, or voting on matters pertaining to the Student with whom the faculty/staff/Third Party has a conflict of interest.

ii. Any faculty/staff/Third who assesses Students should disclose in writing the presence of a conflict of interest to the appropriate Program Manager.

iii. Students should disclose any conflict of interest following the process specified in the Student Handbook for their specific program.

iv. In the event of a conflict of interest, the appropriate Program Manager will develop a plan to remove the faculty/staff/Third Party from the assessment of the Student with whom the faculty/staff/Third Party has a conflict of interest. Each program is required to establish a process to manage the avoidance of conflicts of interest in Student assessment once a conflict of interest has been identified.

v. Once identified, a conflict of interest exists until the Student is no longer a Student, as defined above in section 2) b).

b) Conflicts of interest include:
i. The Student is an Immediate Family Member of the faculty/staff/Third Party who is assessing the Student.

ii. The Student has a consensual relationship with the faculty/staff/Third Party (as defined in the Wake Forest Baptist Medical Center Nepotism and Consensual Relationships policy).

iii. The Student has a Personal Financial Relationship with the faculty/staff/Third Party.

iv. Healthcare relationships:
   (a) For Undergraduate Medical Education (MD) Program Students: The Student has received medical or mental healthcare from the faculty/staff/Third Party.
   (b) For all other programs’ students (not enrolled in the MD program): The Student has a current therapeutic relationship to receive medical or mental healthcare from the faculty/staff/Third Party.

v. The Student, faculty/staff/Third Party perceives a conflict of interest exists that is not specified in items 3) b) i-iv above. Additional information about the nature of the perceived conflict may be requested under this circumstance.

4) Sanctions for Breach of Policy

   a) Students, faculty, staff, and Third Parties have an obligation to comply with this policy. Examples of conduct that violate this policy include (Note: these examples are not intended to be exhaustive):
      
      • Intentional deception or dishonesty in disclosures
      • Omission of relationship disclosures
      • Failure to comply with plans to avoid Conflict of Interest in student assessment

   b) Reports of suspected violations may be made to any of the individuals listed below, or anonymously through the Compliance Hotline (1-877-880-7888). Suspected violations will be investigated and referred to the following for sanctioning as appropriate:

   Students: Program Director, as applicable
   Staff: Human Resources
   Faculty: Dean, School of Medicine/designee and/or President/Chief Medical Officer of Wake Forest Baptist Health
   House Staff: Dean, School of Medicine/designee and/or Associate Dean for Graduate Medical Education/Chief Medical Officer

   c) Possible sanctions may include:

      • Written advisory for placement in the employee or student record
      • Ineligibility to participate in grant applications or on committees
      • Dismissal from an educational or training program
      • Termination of employment
**Program Specific Process for Reporting Conflict of Interest:**

**MD Program:**
As course coordinators/clerkship coordinators are preparing your schedules, we would like to ask you to submit any potential conflicts of interest you foresee during your courses, clerkships, and rotations.

Conflicts of interest important to consider include but are not limited to:
- You are an immediate family member of the individual.
- You are in a consensual relationship with the individual.
- You have a personal financial relationship with the individual.
- You have received medical or mental healthcare from the individual.
- Any other issue not included in the above-mentioned situations you may perceive as a conflict (additional information about the nature of the perceived conflict may be requested under this circumstance).

For further details, please see the [Conflict of Interest Related to Student Assessment Policy](#).

To report a Conflict of Interest, [CLICK HERE](#). Please provide the full name (first and last) of any faculty or house officer in a department(s) or section(s) with whom you perceive as having a conflict of interest. This information will be forwarded to the Senior Associate Dean of Healthcare Education and his/her designee (such as course coordinators and directors) for consideration and, if necessary, management.

**Academic Nursing:**
A student who has personal, familial, or business relationships with a faculty member or supervisor must disclose such relationships to the department director, who will determine appropriate duty assignments, based upon the type of relationship which exists.

**PA Program:**
A conflict of interest is a situation in which personal considerations including financial have the potential to compromise or bias professional judgment and objectivity. Students are required to notify the PA Program of any potential conflicts of interest you foresee during your courses, rotations, or the curriculum during your participation in the PA program.

Conflicts of interest important to consider include but are not limited to:
- You are an immediate family member of the individual.
- You are in a consensual relationship with the individual.
- You have a personal financial relationship with the individual.
- You are receiving current medical care from the individual.
- Any other issue not included in the above-mentioned situations you may perceive as a conflict (additional information about the nature of the perceived conflict may be requested under this circumstance).

To report a conflict of interest:
Please [email the Director of Student Services](#) with the full name of any faculty member, staff member, clinician, or clinical preceptor with whom you perceive a conflict of interest and the reason for the conflict. The Director of Student Services (DSS) or designee will respond as necessary.

If you perceive a conflict of interest with the Director of Student Services, email the Chair of PA Studies.

**Graduate Program:**
Please contact the Graduate School of Arts and Sciences, Biomedical Sciences for information on how to report a conflict of interest.
Student Disability Accommodation Requests Policy and Procedures

PURPOSE

Wake Forest University is committed to ensuring that no qualified student with a properly documented disability is excluded from participation in, subjected to discrimination in connection with, or denied the benefits of any University program or activity due to the student’s disability. To that end, the University provides reasonable accommodations to enable qualified students with properly documented disabilities equal access to University programs and activities. The Policy and Procedures for Student Disability Accommodation Requests (the “Policy”) sets forth the policy and procedures applicable to student disability accommodation requests.

SCOPE

This policy applies to any disability accommodation request made by any University undergraduate, graduate, or professional student (including students of the Wake Forest School of Medicine Academic Nursing, Physician Assistant (PA), and Undergraduate Medical Education (MD) programs, and the Graduate School of Arts and Sciences, Biomedical Sciences program) regardless of the type of disability involved and regardless of the University program or activity in which the student is enrolled and/or participating.

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES

A. Where and How Students Can Request Disability Accommodations
   1. All student disability accommodation requests must be made to the Learning Assistance Center & Disability Services (“LAC-DS”).
      a. To initiate a request, a student should visit the LAC-DS website at https://lac.wfu.edu/disability-services/ and follow the instructions to submit documentation and request accommodations.
      b. Students may also contact the LAC-DS at 336-758-5929 or lacds@wfu.edu.
   2. Submitting documentation and requesting accommodations will begin the process of determining (1) whether the student has a properly documented disability and, if so, (2) what reasonable accommodations the University will provide to the student.
   3. The LAC-DS may solicit input from other University employees regarding accommodation requests.
   4. The LAC-DS and/or the Section 504 Coordinator are the only University employees authorized to determine whether a student has a properly documented disability and, through the interactive process, what reasonable accommodations the University may provide to the student.
      a. Accommodations are reasonable when they do not fundamentally alter the nature of a program or service and do not represent and undue burden.
      b. Accordingly, it is imperative that students seeking disability accommodations engage in the interactive process with the LAC-DS and that other University employees, including faculty and staff, promptly direct any student seeking disability accommodation to the LAC-DS.

B. Timing of Accommodation Requests
   1. Although a student may make an accommodation request at any time, the University strongly encourages students to make requests as early and as far in advance as possible to allow adequate time for consideration and proper documentation of the disability; the interactive process that will determine what reasonable accommodations the University will provide to the student; and the implementation of those accommodations.
2. The University strongly encourages the student to request the reasonable accommodation to the LAC-DS as soon as possible in advance of the need for the reasonable accommodation.

3. Absent significant extenuating circumstances, the University will not consider or implement any retroactive disability accommodations.

C. Determination of Whether a Student is Qualified and Has a Properly Documented Disability

1. Before determining what reasonable disability accommodations (s) the University will provide to a qualified student, the University must determine whether that student is a qualified student with a properly documented disability.
   a. A qualified student is one who, with or without reasonable disability accommodation, is able to meet the essential requirement – including but not limited to technical standards of the applicable program – for participation in a program or activity.
   b. A person with a disability is any person who has a physical or mental impairment which substantially limits one or more major life activities.
      i. Major life activities are functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, concentrating, thinking, and working as well as major bodily functions such as normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, immune system, and reproductive functions. This list is not exhaustive.

2. A student requesting a disability accommodation must provide required documentation as described below.

D. Required Documentation

1. Documentation of the requesting student’s disability shall be obtained at that student’s expense and must meet the criteria set forth in this Policy.

2. The LAC-DS has developed Guidelines for Documenting an Attention Deficit/Hyperactivity Disorder; Guidelines for Documenting a Psychiatric Disability; Guidelines for Documenting a Learning Disability; and Guidelines for Documenting a Physical Disability or Medical Condition, or Documenting an Autism Spectrum Disorder. These guidelines, which are incorporated herein, can be found at http://lac.wfu.edu/disability-services/.

3. Generally, the following is required:
   a. Current Documentation: The current impact of a disability upon the student is at the crux of determining a reasonable accommodation and as such, documents submitted to support an accommodation request must be current.
   b. Comprehensive Evaluation: The student must include documentation of an evaluation of the student’s disability. The evaluation must be conducted by a qualified professional and must provide information in five areas:
      i. (1) a specific medical diagnosis of a physical, mental, or learning disability;
      ii. (2) a description of how the diagnosis was confirmed based on established diagnostic criteria using diagnostic testing and methods currently utilized in professional practices within the relevant field;
      iii. (3) a description of how the disability limits a major life activity and of the expected duration of the limitation;
      iv. (4) the requesting student’s history with the disability; and
      v. (5) specific recommendation(s) for reasonable accommodations and an explanation of the way in which the proposed accommodations will allow the student equal access to the programs and/or activities in question.
   c. Qualified Professional: The documentation must include the professional credentials of the evaluator, including their licensure and area of specialization. Additional information about their experience with the diagnosis and treatment of adults in the appropriate field is recommended. The evaluator should not be a family member.

E. Evaluation of Accommodation Requests and Determination of Reasonable Accommodations

1. As part of the interactive process, the LAC-DS may confer with the student’s program to determine whether the student is an otherwise qualified student.

2. If the LAC-DS determines that the student requesting accommodation is qualified and has a properly documented disability, the LAC-DS will then continue to engage in an interactive process with the student, other University faculty and staff and, as appropriate, the qualified professional who provided the disability documentation to determine what reasonable accommodations the University will provide to the student.
   a. Reasonable accommodations are those that do not lower or substantially modify essential program or activity
requirements; fundamentally alter the nature of a University service, program, or activity; or result in an undue financial or administrative burden on the University.

F. Letters of Accommodation

1. The LAC-DS will provide to the student, to the faculty member, or to the School’s or Program’s liaison the student’s letter of accommodation detailing any accommodations the University will provide to the student.

2. The student is responsible for ensuring that letters of accommodations are provided to faculty members and other University employees who the student needs to implement the accommodations.

G. Requests for Modification or Continuation of Accommodations

1. It is the requesting student’s responsibility to inform the LAC-DS or the Section 504 Coordinator of any changes to the disability or to request modifications to approved accommodations.

2. Similarly, it is the student’s responsibility to request continuation of the approved accommodations beyond the time period set forth in the letters of accommodation.
   a. To request a continuance or modification, students must re-submit supporting documentation and an updated request for accommodations.

H. Confidentiality

1. The LAC-DS is responsible for information disclosed by a student seeking accommodations.
   a. The Director of the LAC-DS is responsible for maintaining this information in confidential locked files separate from the student’s academic file.

2. Disability information is shared with faculty and staff on a limited “need to know” basis.

3. The confidential file is maintained for seven years after the student has graduated or left the University. The file is then shredded.

I. Appeals/Grievances

J. Students who are denied requested accommodations and/or believe that they have been discriminated against or harassed on the basis of their disability may appeal the denial or file a discrimination or harassment complaint through the Student Disability Grievance Procedure, which is available at http://lac.wfu.edu/disability-services/grievance/.
Student Disability Grievance Procedure

Wake Forest University, including the Wake Forest School of Medicine Physician Assistant (PA), Academic Nursing, and Undergraduate Medical Education (MD) programs, and the Graduate School of Arts and Sciences, Biomedical Sciences Programs, (collectively, “Wake Forest” or the “University”) is committed to ensuring that no otherwise qualified individual with a disability is excluded from participation in, subjected to discrimination in connection with, or denied the benefits of any University programs or activities due to their disability. The University will take steps to prevent the recurrence of any discrimination and to correct discriminatory effects on the complainant and others, if appropriate.

The University has adopted this internal Grievance Procedure to provide for the prompt and equitable resolution of student complaints alleging any action prohibited by Section 504 of the Rehabilitation Act of 1973 (“Section 504”) or Title III of the Americans with Disabilities Act (“Title III”) or otherwise alleging disability-related discrimination or harassment. Section 504 prohibits discrimination on the basis of disability in any program or activity receiving Federal financial assistance, and Title III prohibits discrimination on the basis of disability by private entities (including University) that provide places of public accommodation. The University has designated the following individual as the Section 504 Coordinator:

Aishah Casseus, JD  
Director, Title IX Office  
Section 504 Coordinator  
casseua@wfu.edu  
(336) 758-7258

Who May Grieve?  
Any student currently enrolled at the University who believes they have been discriminated against or harassed on the basis of disability by a Wake Forest employee (e.g., administrator, faculty, staff, adjunct faculty, or other agent of the University); Wake Forest student; or, in certain circumstances, by a visitor to the University, may use this process to file a grievance (the “Grievant”). The grievance must be filed within sixty (60) days of the occurrence of the alleged discriminatory or harassing conduct.

What May Be Grieved?  
An action or decision may be grieved if it involves alleged discrimination or harassment by a Wake Forest employee, student, or, in certain circumstances, by a visitor to the University against a student on the basis of that student’s disability. Such actions may include, but are not limited to, denial of accommodations or lack of physical access to University facilities or programs.

Confidentiality and Prohibition Against Retaliation  
The University will treat all information submitted in connection with a grievance as confidential. Subject to FERPA and other applicable privacy laws, however, the University official investigating the grievance will inform individuals with a legitimate need to know of the grievance and may provide them related information as necessary to allow the University official to conduct a meaningful and thorough investigation. The University official investigating the grievance will inform all involved parties of the need to maintain the confidentiality of such information.

Wake Forest prohibits retaliation for submitting a grievance or participating in a grievance investigation. Retaliation includes threats, intimidation, reprisals, and adverse actions. The University official investigating the grievance will advise all involved parties of this strict prohibition against retaliation.

Informal Grievance Procedure  
The Informal Grievance Procedure is designed to facilitate a satisfactory resolution of the grievance in an informal manner. The Grievant has the option to forego the Informal Grievance Procedure and move immediately to the Formal Grievance Procedure.

The Grievant initiates the Informal Grievance Procedure by contacting the Section 504 Coordinator. If the Coordinator is the subject of the grievance, the Grievant initiates the Informal Grievance Procedure by contacting the Vice President/Associate Dean for Healthcare Education of Wake Forest School of Medicine, who will assign an administrator in lieu of the Coordinator. The Grievant may contact the appropriate official by e-mail, phone, or in person. To initiate the Informal Grievance Procedure, a Grievant is not required to submit the grievance in writing, but the Coordinator may ask the Grievant to do so or to submit other evidence, if necessary to facilitate a satisfactory resolution.

The Coordinator will attempt to expeditiously facilitate a satisfactory resolution. The Coordinator may meet in person with the Grievant, confer with the individual(s) against whom the grievance is filed, attempt to arrange a meeting between the Grievant and the
individual(s), or take any other steps the Coordinator believes will be useful in promoting resolution.

Within 21 calendar days after the Grievant initially contacts the Coordinator regarding the grievance, the Coordinator will inform the Grievant and, as appropriate, the individual(s) against whom the grievance is filed in writing of the outcome of the Informal Grievance Procedure.

**Formal Grievance Procedure**

If the Grievant is not satisfied with the resolution reached using the Informal Grievance Procedure, or if the Grievant chooses not to use the Informal Grievance Procedure, the Grievant may initiate the Formal Grievance Procedure by submitting a written complaint to the Coordinator. If the Coordinator is the subject of the grievance, the Grievant initiates the Formal Grievance Procedure by contacting the Vice President/Associate Dean for Healthcare Education of Wake Forest School of Medicine, who will assign an administrator in lieu of the Coordinator. A Grievant who chooses to initiate the Grievance Procedure after participating in the Informal Grievance Procedure must do so within 14 calendar days of receipt of the Coordinator’s written notification of the outcome of the Informal Grievance Procedure. The written complaint must:

- be dated;
- state the problem or action alleged to be discriminatory and the date of the alleged action;
- state how the action is discriminatory (or how the decision is unreasonable if it a denial of a requested accommodation);
- name the individual(s) against whom the grievance is filed;
- state the requested remedy; and
- be signed by the Grievant.

Within seven calendar days of receiving the written complaint, the Coordinator will provide written notification of receipt of the complaint to the Grievant and to the individual(s) against whom the grievance is filed. The Coordinator will also conduct a thorough and impartial investigation of the complaint, affording the Grievant and the individuals against whom the complaint is filed an opportunity to present witnesses and submit evidence regarding the allegations. Within 30 days of receipt of the written complaint, the Coordinator will provide the Grievant and the individual(s) against whom the complaint is filed a written decision regarding the grievance. The decision will include a summary of relevant findings of fact, a conclusion, and, if applicable, an explanation of remedies, which may include the imposition of disciplinary actions/sanctions and/or referral to an individual’s supervisor or another administrator for the determination and imposition of disciplinary actions/sanctions.

**Appeal**

The Grievant or the individual(s) against whom the grievance is filed may appeal within fourteen calendar days of receiving the Coordinator’s written decision and/or any associated disciplinary sanctions by writing to the Vice President/Associate Dean for Healthcare Education of Wake Forest School of Medicine. The written appeal must clearly set forth the grounds for the appeal and must include all supporting evidence. Generally, the Vice President/Associate Dean for Healthcare Education of Wake Forest School of Medicine will limit their review of the Coordinator’s decision to determine whether the Coordinator considered the proper facts and whether there were any procedural irregularities. Within 21 days of receipt of the appeal, the Vice President/Associate Dean for Healthcare Education of Wake Forest School of Medicine will provide the Grievant and the individual(s) against whom the complaint is filed a written decision regarding the appeal. The decision of the Vice President/Associate Dean for Healthcare Education of Wake Forest School of Medicine is final, and the University will disregard any subsequent appeals (in any form) to any University representative, including the University President.

**Adjustment of Deadlines**

The Coordinator or the Vice President/Associate Dean for Healthcare Education of Wake Forest School of Medicine may change the above deadlines for good cause, such as semester or summer breaks or hardship due to the urgency of the matter or the proximity of an event.

**Interim Measures**

If necessary while any grievance investigation is ongoing, the Coordinator or their designee shall have the authority to take all reasonable and prudent interim measures to protect the individual who may have been discriminated against pending completion of the investigation and during the informal or formal processes to resolve the complaint or any appeal thereof. Such interim measures may include, but are not limited to, limiting interaction between the parties, arranging for the provision of temporary accommodations, or staying a course grade.

**Retention of Records**
Records related to the grievance will be confidentially maintained in the office of the Coordinator for three years. Information regarding the outcome of the grievance may be shared with the Center for Learning, Access, and Student Success (CLASS) and others at the University when necessary.

**Disability Accommodations During Grievance Process**
The University will make arrangements to ensure that students with disabilities are provided appropriate accommodations as needed to participate in this Grievance Procedure. Requests for accommodations must be made to the Coordinator. The Coordinator will review the supporting disability-related documentation, make a decision about the request, notify the student about approved accommodations, and make arrangements for the accommodations. Accommodations may include, but are not limited to, providing interpreters for the deaf, providing recordings of materials for the blind, and assuring a barrier-free location for the proceedings.

**External Complaints**
The availability and use of this Grievance Procedure does not prevent a student from filing a complaint of discrimination with external agencies such as the U.S. Department of Education, Office for Civil Rights.
**Wake Forest Baptist Health Nepotism and Consensual Relationships Policy**

**Policy:** The purpose of this policy is to ensure that relationships in the workplace do not raise the perception of favoritism or bias or raise a concern regarding ethics or conflicts of interest. This policy clearly defines standards for close relatives or those in consensual relationships working for Wake Forest Baptist Health in the same or different departments. Additionally, this policy outlines guidelines for supervisory relationships (real or perceived) and research relationships.

**Scope:** This policy applies to WFBH Employees and Faculty.

**Definitions**

**Policy:** A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, employee, students, visitors, and others are expected to operate.

**WFBH:** Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

**Family Member/Relationship:** For the purpose of this policy, “family member” and “family relationship” includes the spouse, domestic partner, child, grandchild, grandparent, parent, brother, sister, those in a “step,” “half” or “in-law” relationship (e.g. step-child, step-grandchild, step-grandparent, step-parent, step-brother, step-sister), aunt, uncle, niece, nephew or first cousin of an employee/faculty member.

**Consensual Relationship:** A dating, sexual or cohabitating relationship

**Supervisory Relationship:** Any working relationship in which one employee has direct or indirect influence over the employment of another. This includes but is not limited to scheduling, assigning work, evaluating performance, recommending performance improvement action, and making recommendations regarding compensation or other terms or conditions of employment.

**Research Relationship:** A relationship that involves collaboration on research or authorization of expenditure requests related to research.

**Conditions of Employment:** Include but are not limited to salary, hours worked, shifts, working environment, transfers and promotions.

**Policy Guidelines**

It is essential to the integrity of WFBH management practices, education and research to avoid real or perceived conflicts of interest that may be created by relationships in the workplace. Any consensual relationship or family relationship described in this policy that exists or develops during the course of employment must be disclosed as directed below.

1. **Supervisory Relationships:** Employee/Faculty members are not permitted to have direct or indirect influence over the conditions of employment of a family member or individual with whom they have a consensual relationship. This includes relationships within the same reporting structure, as well as those involving direct supervision.

2. **Research Relationships:** Research relationships between family members or employee/faculty members who have a consensual relationship are normally permitted but must be disclosed (see “Disclosure Process” below) so that the conflict-of-interest risk can be managed.

3. **Students:** Please refer to the Conflict of Interest Related to Student Assessment Policy

**Disclosure Process**

*Initial Disclosure*
Any supervisory or research relationship involving family members, or a consensual relationship must be disclosed through
submission of the **Workplace Relationship Disclosure Form**. The disclosure must occur within 30 days of the development of the relationship.

For cases involving new hires, the disclosure must be made, and an exception approved prior to making an employment offer.

**Annual Disclosure**

The Conflict of Interest Office conducts an annual online disclosure process for all potential conflicts of interest, including those related to nepotism and consensual relationships. Supervisory or research relationships involving family members or consensual relationships must be disclosed as part of the annual process, in addition to the initial disclosure.

**Actions Following Disclosure:** Following submission of the Workplace Relationship Disclosure Form, Employee Relations or the Conflict of Interest Office will consult with department leadership, as necessary, to determine appropriate action for minimizing or removing the conflict of interest risk.

**Supervisory Relationships:** Supervisory relationships involving family members or a consensual relationship are normally managed by actions such as a transfer to another work group, a change in shift, or a change in reporting structure. Exceptions may be granted for special circumstances.

In cases where an exception has been granted, certain responsibilities (including performance reviews and compensation decisions) will be assigned to another department leader, who will be identified in the written approval. The assigned leader shall not be someone who reports to the supervising individual in the involved relationship.

Approved exceptions will be communicated in writing to the supervisor and employee/faculty member involved, along with department leadership. A copy of the approval will be placed in the employment record of both the supervisor and employee/faculty member. An additional copy will be forwarded to the Conflict of Interest Office.

**Research Relationships:** Following disclosure of a research relationship, the individuals involved will cooperate with the Conflict of Interest Office to eliminate the appearance of bias, unethically or conflict of interest that may be created by collaborating or working directly with a family member or other party in a consensual relationship.

Research relationships normally can be managed without a change in position, shift or reporting structure for either of the involved individuals, but under certain circumstances, changes may be required.

**How to Report Concerns:** If an employee or faculty member believes that they have been negatively impacted by a consensual relationship or family relationship as described in this policy should contact one of the following:

Employee Relations via the HR Customer Support line –
People Link: 336-716-6464
Compliance Office – 336-713-4949
Compliance Hotline: 1-877-880-7888

No retaliation may be directed toward a employee/faculty member who reports a good faith concern about a workplace relationship.

**Leadership Guidelines:** WFBH leaders are responsible for ensuring that employees/faculty in their departments disclose any consensual relationship or family relationship that exists or develops, through submission of the Workplace Relationship Disclosure Form. If an exception has been granted for a workplace relationship normally prohibited by this policy, it is the responsibility of department leader to ensure that concerns about harassment, bias, ethics and conflict of interest do not develop.

Leaders who engage in consensual relationships in the workplace should be aware of the potential for increased risk of concerns or allegations about harassment, bias, favoritism, unfairness, ethical concerns, and/or conflict of interest. Concerns may arise even in cases not involving a supervisory relationship or research relationship as described in this policy. In cases of doubt, guidance should be sought from Employee Relations.

**Related Links:**
- Conflict of Interest Policy
- Conflict of Interest Related to Student Assessment Policy
- Workplace Relationship Disclosure Form
**Anti-Harassment Policy**

Wake Forest School of Medicine is committed to maintaining an educational and working environment free of discrimination. Discrimination or harassment of any employee or student based on sex, race, color, religion, national origin, sexual orientation, gender identity, age, or disability will not be tolerated. Individuals found to be in violation of this policy will be subject to disciplinary action which may include written warning, demotion, transfer, suspension, expulsion, or dismissal. Individuals who, in good faith, report harassment or present evidence in a harassment investigation are protected from retaliation. Acts of retaliation are a violation of this policy and are prohibited by law, even if a claim of discrimination later is proven to be unfounded.

**Sexual/Gender Harassment**

Sexual and gender harassment are forms of sex discrimination. They are illegal under applicable law and a violation of school policy.

Complaints regarding sexual/gender harassment allegedly committed by students of Wake Forest School of Medicine should be reported and will be addressed in accordance with the Wake Forest School of Medicine Student Sexual Misconduct Policy.

Complaints regarding sexual/gender harassment allegedly committed by faculty or staff members should be reported and will be addressed in accordance with the Wake Forest Baptist Medical Center Harassment Policy.

**Other Harassment in the Work or Academic Environment**

Harassment on the basis of race, color, religion, or national origin is a form of unlawful discrimination and is prohibited. When harassment based on race, color, religion, or national origin has the “purpose or effect of substantially interfering with an individual’s work or academic performance or creating an intimidating, hostile, or offensive working or educational environment,” it rises to the level of prohibited discrimination. In addition, these principles apply to harassment on the basis of age and disability under the Age Discrimination Act, the Age Discrimination in Employment Act, Section 504 of the Rehabilitation Act and the Americans with Disabilities Act, respectively. Finally, this policy also applies to harassment on the basis of sexual orientation and gender identity.

Examples of conduct that may rise to the level of discrimination include jokes that refer to race, color, religion, national origin, sexual orientation, gender identity or disability or that portray age in a negative light; the posting or distribution of cartoons, drawings, or any other material that adversely reflects on a person’s race, religion, national origin, disability, sexual orientation, gender identity or age; the use of “slurs” or other offensive language; practical jokes, horseplay, or teasing that tends to demean or ridicule a person’s race, religion, national origin, sexual orientation, gender identity or disability or that reflects negatively on a person’s age.

**Procedure**

Anyone who believes that he or she has been harassed or has observed or been subject to a violation of this Policy should promptly report the matter in accordance with this Policy. Staff members should report harassment to their supervisor, or the Vice President for Human Resources, or the Director of Employee Relations. Faculty members should report harassment to their chairs, the Senior Associate Dean for Faculty Affairs, or the Dean of the school. Students should report harassment to the Title IX Coordinator, the appropriate manager of their applicable program or the Dean of the school. Any member of management who receives a complaint or observes conduct that may constitute a violation of this Policy is obligated to notify the Vice President for Human Resources or the Director of Employee Relations or, if students are involved, the Title IX Coordinator, the appropriate manager of their applicable program, or the Dean of the school. The investigation and resolution of complaints alleging harassment on the basis of an individual’s disability will be coordinated by the institution’s Section 504/ADA Coordinator.

Complaints of harassment will be treated seriously and will be promptly investigated with reasonable steps being taken to protect the confidentiality of all parties. Information regarding the complaint procedure and supervisory responsibilities may be obtained from the Office of the Director of Employee Relations, who is available to provide guidance and assistance in the proper handling of any allegation. In all cases involving students, the Director of Employee Relations will coordinate his/her office’s response with the appropriate manager of the student’s educational program.

In determining whether conduct constitutes a violation of this Policy, those entrusted with carrying out this policy will look at the record as a whole and at the totality of the circumstances, such as the nature of the offensive conduct and the context in which the alleged incidents occurred. The determination of the suitability of a particular action will be made from the facts, on a case-by-case basis. Following an objective evaluation of the gathered information, the parties will be notified of the outcome of the investigation. Employees and students utilizing this process will be protected from retaliation.

Wake Forest Baptist Health has a separate Harassment Policy. For further information on the Medical Center’s policy please visit the Wake Forest Baptist Health PolicyTech site.
WAKE FOREST BAPTIST HEALTH

SEX AND GENDER DISCRIMINATION AND HARASSMENT POLICY AND TITLE IX SEXUAL HARASSMENT AND NON-TITLE IX SEXUAL MISCONDUCT GRIEVANCE PROCEDURES

2020-21

Eff. 8/14/2020

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1 As used in this Policy, “sex” includes birth/biological sex and sexual orientation, and gender includes gender identity and expression.
2 As defined by Title IX of the Education Amendments Act of 1972 and its implementing regulations (“Title IX”) and herein, Sexual Harassment includes Sexual Assault, Dating Violence, Domestic Violence, and Stalking
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EXHIBIT A ................................................................................................................................................ A-1
IMPORTANT INFORMATION FOR INDIVIDUALS WHO MAY BE VICTIMS OF SEXUAL HARASSMENT, SEXUAL MISCONDUCT, SEXUAL ASSAULT, DATING VIOLENCE, DOMESTIC VIOLENCE, OR STALKING:

If you or someone you know may have been a victim of the behaviors listed above or any other type of violence, you are strongly encouraged to seek immediate assistance.

ASSISTANCE CAN BE OBTAINED 24 HOURS A DAY, 7 DAYS A WEEK,

FROM: THE WINSTON-SALEM POLICE DEPARTMENT
101 N. MAIN ST., WINSTON-SALEM, NC 27101
EMERGENCY: 911
NON-EMERGENCY: 336-773 7700

OR

WAKE FOREST BAPTIST MEDICAL CENTER SECURITY SERVICES MEDICAL CENTER BLVD., WINSTON-SALEM, NC 27157 EMERGENCY: 336-716-9111
NON-EMERGENCY: 336-716-3305

During business hours (8:30 a.m. to 5:00 p.m., Monday through Friday), you are also strongly encouraged to contact one of the following individuals:

Aishah Casseus, JD
Director, Title IX Office
336-758-7258; casseua@wfu.edu

Jessica Harris Telligman, JD
Assistant Director, Title IX Office
336-758-4997; telligjr@wfu.edu  Reynolda Hall, Suite 307

Sarah Riney, JD
Deputy Title IX Coordinator
336-713-3352; sriney@wakehealth.edu

Tanya Gregory, PhD
Deputy Title IX Coordinator
336-713-0819; tgregory@wakehealth.edu

Tonya Robbins,
Deputy Title IX Coordinator
Employee Relations Manager, HR Client Partnerships
Tonya.Robbins@wakehealth.edu

Counseling & Well-Being Services
Bowman Gray Center for Medical Education (“BGCME”) 1st Floor, Behind Medical Grounds
counselingservices@wakehealth.edu

Employee Assistance Program
336-716-5493

Wake Forest School of Medicine Faculty Ombuds Office
Jeff Weiner, PhD, Faculty Ombuds FacultyOmbuds@wakehealth.edu
For additional information about seeking medical assistance and emotional support, as well as important contact information for local law enforcement agencies, hospitals, and other resources, see Exhibit A attached to this document.
SECTION I. SEX AND GENDER 
DISCRIMINATION AND 
HARASSMENT POLICY

1.1 Notice of Nondiscrimination

Wake Forest Baptist Health ("WFBH") is committed to diversity and inclusion. In compliance with and as required by Title IX of the Education Amendments Act of 1972 and its implementing regulations ("Title IX") and other civil rights laws, as well as in furtherance of its own values, WFBH does not discriminate on the basis of race, color, national origin, sex, sexual orientation, gender, gender identity, gender expression, pregnancy, disability, age, religion, veteran status, or any other characteristic or status protected by applicable local, state, or federal law in admission, treatment, or access to, or employment in, its programs and activities.

Discrimination and harassment are antithetical to the values and standards of the WFBH community; are incompatible with the safe, healthy environment that the WFBH community expects and deserves and will not be tolerated. WFBH is committed to providing programs, activities, and an education and work environment free from discrimination and harassment. WFBH is also committed to fostering a community that promotes prompt reporting and fair and timely resolution of those behaviors.

Inquiries concerning discrimination or harassment on the basis of sex and gender may be referred to WFBH’s Title IX Director, Aishah Casseus. Exhibit A to this document provides the Title IX Coordinator’s contact information.

Inquiries concerning discrimination or harassment based on a protected characteristic or status other than sex or gender may be referred to Sarah Riney or Tanya Gregory (for students) or Employee Relations (for employees). Exhibit A also provides their contact information.

Individuals may also make inquiries regarding discrimination or harassment to the U.S. Department of Education’s Office for Civil Rights by contacting the District of Columbia Office, 400 Maryland Avenue, SW, Washington, D.C. 20202-1475; Phone 800-421-3481; email: OCR@ed.gov.

1.2 Prohibition on Sex and Gender Discrimination, Harassment and Misconduct, Retaliation, and Providing False Information or Interfering with a Grievance Process

This Policy prohibits discrimination, harassment, and misconduct on the basis of sex and gender. As used in this policy, the term “sex” includes birth/biological sex and sexual orientation, and gender includes gender identity and expression. WFBH strongly encourages the prompt reporting of, and is committed to timely and fair resolution of, complaints of sex and gender discrimination, harassment, and misconduct.

Sexual Harassment, as defined by Title IX and in this Policy,\(^4\) is a specific type of sex discrimination/harassment that includes Sexual Assault, Dating Violence, Domestic Violence, and Stalking and that WFBH addresses, as required by Title IX, using its Pre-Hearing and Hearing Grievance Procedures in Sections II and III of this Policy.

This Policy also prohibits Retaliation, as defined by Title IX and in this Policy. Complaints alleging Retaliation may be filed with the Title IX Coordinator and, at the discretion of the Title IX Coordinator, may be addressed under WFBH’s Pre-Hearing and Hearing Grievance Procedures set forth below or other grievance procedures adopted by WFBH.

Sexual Misconduct, as defined by WFBH in this Policy, is addressed using the Pre-Hearing Grievance Procedures and Hearing Grievance Procedures in Sections II and IV of this Policy.

Additionally, WFBH presumes that individuals who file a Formal Complaint do so in good faith; however, any individual who knowingly files a false Formal Complaint or who interferes with a WFBH grievance process may be subject to disciplinary action. Interference with a grievance process may include, but is not limited to, preventing or attempting to coerce, compel, or prevent an individual from providing testimony or relevant information; removing, destroying, or

\(^4\) Capitalized terms used in this Policy are defined in Section 1.0.
altering documentation relevant to an investigation; or providing false or misleading information to WFBH officials who are involved in the investigation and/or resolution of a Formal Complaint, or encouraging others to do so. The outcome of a grievance process does not mean, in and of itself, that an individual knowingly filed a false Formal Complaint or that a determination regarding responsibility alone is sufficient to conclude that an individual made a materially false statement in bad faith.

1.3 Reporting and Period of Limitations

Any person (whether or not alleged to be the victim) may report sex or gender discrimination, harassment, or misconduct, including Sexual Harassment, in person, by mail, by telephone, or by electronic mail, using the contact information for the Title IX Coordinator listed in Exhibit A, or by any other means that results in the Title IX Coordinator receiving the person’s verbal or written report. Such a report may be made at any time (including during non-business hours).

WFBH strongly encourages all employees and other members of the WFBH community to promptly report concerns regarding suspected or known discrimination/harassment/misconduct on the basis of sex or gender to the Title IX Coordinator.

In addition to the Title IX Coordinator, WFBH has designated certain employees as individuals who are required to report discrimination and harassment on the basis of sex or gender to the Title IX Coordinator. These Mandatory Reporters consist of the following employees:

**Academic Staff**

- Healthcare Education Executive Council Leadership of the education programs: Department Chair, PA Studies; Department Chair, Academic Nursing; Dean, Graduate School of Biomedical Sciences; Associate Dean, Medical Education Academic Affairs; Associate Dean, Student Affairs
- Dean, School of Medicine

**Administrative Staff**

- All members of the Board of Trustees (including student, faculty, and staff members) and the Board Secretary
- President
- CEO
- Vice Presidents, including assistant and associate vice presidents
- Chief Human Resource Officer
- Title IX coordinator and Deputy Title IX coordinators
- Department Chairs
- WFBH Security Officers

Additionally, WFBH has designated the following employees as confidential resources for students:

- Student Wellness and Counseling, including Chaplain’s Office staff

WFBH employees may contact the Employee Assistance Program for confidential consultations.

Information about sex or gender discrimination, harassment, or misconduct shared with these confidential resources will not be reported to other WFBH personnel (including the Title IX Coordinator), to the Respondent, or to others, unless the disclosing individual gives their consent to the disclosure or the law requires it (as may be the case with abuse involving a minor or under conditions involving imminent physical harm, for example). Confidential resources may report non-identifying statistical information to the Title IX Coordinator for recordkeeping and compliance purposes and are also required to report such statistical information to the Wake Forest Police Department if the confidential resource is a Campus Security Authority under the Clery Act.

WFBH will address allegations of sex and gender discrimination, harassment, and misconduct in accordance with this Policy no matter the length of time that has passed since the alleged conduct. However, WFBH strongly encourages prompt reporting to preserve evidence for a potential legal or disciplinary proceeding. Delay may compromise the ability
to investigate, particularly if the individuals who are involved in or who are witnesses to the alleged conduct are no longer WFBH students or employees.

1.4 Applicability of Policy and Grievance Procedures

This Policy applies to allegations of Sexual Harassment made against a student or an employee of WFBH or a third party and allegations of Sexual Misconduct made against a student, regardless of sex, sexual orientation, sexual identity, gender expression, or gender identity. Allegations of sex discrimination and harassment made against a student or employee of Wake Forest University will be addressed under the Wake Forest University Sex and Gender Discrimination and Harassment Policy and Grievance Procedures.

The Title IX Sexual Harassment Pre-Hearing and Hearing Grievance Procedures apply only to allegations of Sexual Harassment in an Education Program or Activity (as defined herein), and to alleged Sexual Misconduct (if any) arising from the same facts and circumstances as the allegations of Sexual Harassment. The Sexual Misconduct Pre-Hearing and Hearing Grievance Procedures will apply to allegations of Sexual Misconduct made against students and, at the direction of the Title IX Coordinator, to related allegations of Retaliation. Allegations of Retaliation that do not occur within the context of an existing investigation or hearing will be determined by the Title IX Coordinator following an investigation. Allegations of sexual harassment and sexual misconduct that are not made against employees and that are not covered under the scope of this Policy will be addressed in accordance with the Wake Forest Baptist Medical Center Harassment Policy.

1.5 Information for Parents and Guardians of Minors

When a student Claimant or Respondent is a minor (age 17 or younger) or has a guardian appointed and their parent or guardian has the legal right to act on the student’s behalf, then the parent or guardian may file a Formal Complaint on behalf of the student, although the student would be the “Claimant.” In such a situation, the parent or guardian may exercise the rights granted to the student under this Policy, including requesting Supportive Measures and participating in a grievance process. Similarly, the parent or guardian may accompany the student to meetings, interviews, and hearings during a grievance process to exercise rights on behalf of the student, while the student’s Advisor of choice may be a different person from the parent or guardian. Whether or not a parent or guardian has the legal right to act on behalf of an individual would be determined by state law, court orders, child custody arrangements, or other sources granting legal rights to parents or guardians.

Additionally, FERPA and its implementing regulations address the circumstances under which a parent or guardian is permitted to inspect and review a student’s education records. However, in circumstances in which FERPA would not grant a party the opportunity to inspect and review evidence in connection with a grievance process, pursuant to Title IX and its implementing regulations, the student has an opportunity to do so, and a parent or guardian who has a legal right to act on behalf of the student has the same opportunity.

1.6 Definitions Applicable to Policy

Capitalized terms used herein are defined as follows.

“Actual Knowledge” means notice of Sexual Harassment or Sexual Misconduct or allegations of Sexual Harassment or Sexual Misconduct to WFBH’s Title IX Coordinator, to any of the Mandatory Reporters listed in Section 1.03. “Notice” as used in this paragraph includes, but is not limited to, a report of Sexual Harassment or Sexual Misconduct to the Title IX Coordinator.

“Clery Act” refers to the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, which is a federal statute codified at 20 U.S.C. § 1092(f), with implementing regulations in the U.S. Code of Federal Regulations at 34 C.F.R. § 668.46. The Clery Act requires all colleges and universities that participate in federal financial aid

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5 This standard is not met through imputation of knowledge based solely on vicarious liability or constructive notice. This standard also is not met when the only individual with Actual Knowledge is the Respondent. The mere ability or obligation to report Sexual Harassment and Sexual Misconduct or to inform a student about how to report Sexual Harassment or Sexual Misconduct, or having been trained to do so, does not qualify an individual as one to whom notice of Sexual Harassment or Sexual Misconduct or allegations of Sexual Harassment or Sexual Misconduct constitutes Actual Knowledge.
programs to keep and disclose information about crime on and near their respective campuses.

“Complainant” or “Claimant” means an individual who is alleged to be the victim of conduct that could constitute Sexual Harassment or Sexual Misconduct, irrespective of whether a Formal Complaint has been filed.

“Consent” means permission for something to happen or agreement to do something. For example, a person consents to sexual activity if/when they give permission for the activity to occur or agree to engage in the activity. Consent is unambiguous, informed, active (not passive), voluntary (freely given), mutually understandable words and/or actions that indicate a willingness to participate in the sexual activity.

Whether someone has given consent is based on the totality of the circumstances and is determined by reference to a reasonable person in the same or similar circumstances. Once consent to a sexual act has been given, consent can be withdrawn at any time by communicating words and/or actions to the other person before or during that sexual act. Consent is automatically withdrawn if someone becomes unconscious or falls asleep during a sexual act.

Consent cannot be inferred from silence, passivity, or a lack of resistance. Non-verbal communication alone may or may not be sufficient to constitute consent. Furthermore, consent cannot be inferred from a current or previous dating or sexual relationship (or the existence of such a relationship with anyone else), from someone’s attire, spending money, or consent previously given. In other words, consenting to one sexual act does not imply consent to another sexual act.

Consent cannot be coerced. Examples of coercion that prevent consent include physical force, violence, duress, intimidation, deception, or the threat, expressed or implied, of bodily injury.

The use of alcohol or other drugs does not diminish one’s responsibility to obtain consent before sexual activity and does not excuse conduct that violates this Policy.

Consent may never be given by:

1. Minors, even if the other participant did not know the minor’s age;
2. Mentally disabled persons, when the Respondent knows or should know (based on a Reasonable Person standard) that the individual allegedly giving consent is not capable of consenting due to the disability; or
3. Persons who are Incapacitated.

“Day” means a calendar day, unless otherwise specified.

“Education Program or Activity” means (1) locations, events, or circumstances over which Wake Forest University Health Sciences exercised substantial control over both the Respondent and the context in which the alleged Sexual Harassment occurred; and (2) any building owned or controlled by a student organization that is officially recognized by Wake Forest University Health Sciences. Educational programs and activities include:

1. Degree- or certificate-granting programs of the SOM, as well as the Graduate School of Biomedical Sciences programs;
2. Affiliation educational arrangements with Wake Forest University Health Sciences for visiting clinical rotations;
3. Medical and other residency programs;
4. Research and medical fellowships;

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6 A minor is a person who is legally below the age of consent as set forth in the applicable law. Determining whether someone is below the age of consent will be judged by the law of the place where the sexual act occurred. In North Carolina, the age of consent is 16 years old.
5. Internships;

6. Educational programs offered to middle school, high school, college and university students; and

7. Any program or activity offered that is educational in nature beyond on-the-job training, general interest, or routine continuing education programs.

Additional factors in determining whether a program or activity is educational include, but are not limited to:

1. Whether it is structured through a particular course of study, whether full- or part-time;

2. Whether participants earn academic credit toward a degree or certificate, or qualify to sit for professional exams; and

3. Whether a program provides instructors, exams, or other evaluation process.

“Education Record” has the meaning assigned to it under FERPA.

“FERPA” is the Family Educational Rights and Privacy Act, a federal statute codified at 20 U.S.C. § 1232g, with implementing regulations at 34 C.F.R. § 99. FERPA protects the privacy of student Education Records. FERPA grants to eligible students the right to access, inspect, and review Education Records, the right to challenge the content of Education Records, and the right to consent to the disclosure of Education Records.

“Formal Complaint” means a document filed by a Claimant or signed by the Title IX Coordinator alleging Sexual Harassment or Sexual Misconduct against a Respondent and requesting that WFBH investigate the allegation of Sexual Harassment or Sexual Misconduct. At the time of filing a Formal Complaint, a Claimant must be participating in or attempting to participate in WFBH’s Education Program or Activity. This same requirement does not apply to Formal Complaints alleging Sexual Misconduct. A Formal Complaint may be filed with the Title IX Coordinator in person, by mail, or by electronic mail by using the contact information listed for the Title IX Coordinator in Exhibit A. As used in this paragraph, the phrase “document filed by a Claimant” means a document or electronic submission that contains the Claimant’s physical or digital signature, or otherwise indicates that the Claimant is the person filing the Formal Complaint.

“Incapacitated” means that a person does not have the capacity to consent. A person does not have the capacity to consent to a sexual act if, at the time of the act, they cannot understand the sexual nature of the proposed act, cannot understand that they have the right to refuse to participate in the act, or are otherwise unaware that the sexual activity is occurring.

For example, a person is Incapacitated if, because of the effect of alcohol, narcotics, drugs, or other substances, the person cannot understand the sexual nature of the proposed act or cannot understand that they have the right to refuse to participate in the act, and the Respondent knows or should know (based on a Reasonable Person standard) that the other person does not have the capacity to consent.

Other examples of persons who do not have the capacity to consent include persons who are unconscious, asleep, or physically helpless.

“Reasonable Person” means a reasonable person under similar circumstances and with similar identities.

“Relevant Evidence” means evidence that (a) has any tendency to make a fact more or less probable than it would be without the evidence; and (b) the fact is of consequence in determining the action.

Evidence will not be considered Relevant Evidence if the question or proffered evidence constitutes, or seeks disclosure of: (1) information protected under a legally recognized privilege, unless the person holding such privilege has waived the privilege; (2) a party’s records that were made or maintained by a physician, psychiatrist, psychologist, or other recognized professional or paraprofessional acting in the professional’s or paraprofessional’s capacity, or assisting in that capacity, and which were made and maintained in connection with the provision of treatment to the party, unless WFBH has received that party’s voluntary, written consent to do so; (3) the Claimant’s sexual predisposition or prior
sexual behavior, unless such questions and evidence about the Claimant’s prior sexual behavior are offered to prove that someone other than the Respondent committed the conduct alleged by the Claimant, or if the questions and evidence concern specific incidents of the Claimant’s prior sexual behavior with respect to the Respondent and are offered in an effort to prove consent; or (4) Respondent’s past sexual activity, if Respondent was found “not responsible” by WFBH.

“Respondent” means an individual who has been reported to be the perpetrator of conduct alleged to constitute Sexual Harassment, Sexual Misconduct, or Retaliation.

“Retaliation” means (1) any adverse action (including direct and indirect intimidation, threats, coercion, discrimination, or harassment (including charges for conduct violations that do not involve sex discrimination or harassment or Sexual Harassment or Sexual Misconduct but that arise out of the same facts or circumstances as a report or complaint of sex discrimination or harassment or a report or Formal Complaint of Sexual Harassment or Sexual Misconduct) that is (2) threatened or taken against a person: (a) for the purpose of interfering with any right or privilege secured by Title IX or provided under this Policy; or (b) because the person has made a report or Formal Complaint, testified, assisted, or participated or refused to participate in any manner in an investigation, proceeding, or hearing related to Title IX or Sexual Misconduct.7

“Sexual Harassment” as defined by Title IX and in this Policy means conduct on the basis of sex that satisfies one or more of the following:

(1) an employee of WFBH conditioning the provision of an aid, benefit, or service on an individual’s participation in unwelcome sexual conduct (commonly referred to quid pro quo harassment);

(2) unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to an Education Program or Activity; or

(3) “Sexual Assault,” is any sexual act directed against another person, without the consent of the person, including instances where the person is incapable of giving consent. Sexual Assault can occur between individuals of the same or different sexes and/or genders. Sexual Assault includes the following:

- **Rape**: The carnal knowledge of a person, without the consent of the person, including instances where the person is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental or physical incapacity;

- **Sodomy**: Oral or anal sexual intercourse with another person, without the consent of the person, including instances where the person is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental or physical incapacity;

- **Sexual Assault with an Object**: To use an object or instrument to unlawfully penetrate, however slightly, the genital or anal opening of the body of a person, without the consent of the person, including instances where the person is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental or physical incapacity;

- **Fondling**: The touching of the private body parts of a person for the purpose of sexual gratification, without the consent of the person, including instances where the person is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental or physical incapacity;

- **Incest**: Sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law; and

- **Statutory Rape**: Sexual intercourse with a person who is under the statutory age of consent.

“Dating Violence,” as defined in 34 U.S.C. § 12291(a)(10); violence committed by a person— (A) who is or has been in a social relationship of a romantic or intimate nature with the victim; and (B) where the existence of such a relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; and (iii) the frequency of interaction between the persons involved in the relationship;

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7 Retaliation does not include (1) the exercise of rights protected under the First Amendment; (2) charging an individual with making a materially false statement in bad faith in the course of a grievance proceeding (provided, however, that a determination regarding responsibility alone is not sufficient to conclude that an individual made a materially false statement in bad faith); or (3) good faith actions lawfully pursued in response to a report of prohibited conduct.
“Domestic Violence,” as defined in 34 U.S.C. § 12291(a)(8); felony or misdemeanor crimes of violence under North Carolina law and committed by a current or former spouse or intimate partner of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person’s acts under the domestic or family violence laws of the jurisdiction; or

“Stalking,” as defined in 34 U.S.C. § 12291(a)(30): engaging in a course of conduct directed at a specific person that would cause a reasonable person to (A) fear for their safety or the safety of others; or (B) suffer substantial emotional distress. A “course of conduct” means two or more acts, including, but not limited to, acts in which the stalker directly, indirectly, or through third parties, by any action, method, device, or means, follows, monitors, observes, surveils, threatens, or communicates to or about a person, or interferes with a person’s property. “Substantial emotional distress” means significant mental suffering or anguish that may, but does not necessarily require, medical or other professional treatment or counseling.

“Sexual Misconduct” is defined as follows:

(1) Conduct of a Wake Forest School of Medicine student that would otherwise meet the definition of Sexual Harassment but does not meet the geographical or personal jurisdictional requirements under Title IX and its implementing regulations. For example, an alleged sexual assault that occurs in an off-campus apartment leased by a student would not satisfy the geographical jurisdiction of Title IX, but that alleged assault would be addressed under this Policy as Sexual Misconduct.

(2) Sexual/Gender-Based Harassment: Sexual or gender-based harassment is a form of discrimination that includes verbal, written, or physical behavior, directed at someone, or against a particular group, because of that person’s or group’s sex, gender identity, actual or perceived sexual orientation, or based on gender stereotypes, when that conduct is unwelcome and meets the following criteria:

(a) Submission to or rejection of the conduct is made either explicitly or implicitly a term or condition of an individual’s education, employment, or participation in a WFBH activity or program; or

(b) Submission to or rejection of the conduct is used as the basis for, or as a factor in, decisions affecting an individual’s education, employment, or participation in a WFBH activity or program; or

(c) the conduct has the purpose or effect8 of creating an intimidating, hostile, or offensive educational, employment, or WFBH activity or program environment(s) for an individual, or

(d) the conduct unreasonably interferes with the educational, employment, or WFBH activity or program environment(s) of an individual; and

2. The conduct is sufficiently severe or pervasive that it alters the terms, conditions, or privileges of an individual’s education, employment, or participation in a WFBH activity or program.

Conduct may be verbal or nonverbal, written, or electronic. Sexual or gender-based harassment can occur between any persons, including those the same or opposite sex, and either as single or repeated incidents. Whether conduct is sufficient to constitute harassment is evaluated under the totality of the circumstances, including the frequency of the conduct, its severity, whether it is physically threatening or humiliating, or merely an offensive utterance. These factors are evaluated from both subjective and objective viewpoints, considering not only the effect that the conduct actually had on the person, but also the impact it would likely have had on a reasonable person in the same situation. The conduct must subjectively and objectively meet this definition to be sexual or gender-based harassment under this Policy.

This definition applies only to Wake Forest School of Medicine students and from the time a student matriculates at Wake Forest and continues until the student is no longer enrolled at Wake Forest. This includes conduct taking place

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8 In a pedagogical setting, such as a classroom, the conduct must have both purpose and effect.
anywhere in the world and is not limited to conduct within Wake Forest’s Education Programs or Activities. Complaints of Sexual Misconduct allegedly committed by employees of Wake Forest University Baptist Medical Center should be referred to the Harassment Policy.

(3) Sexual exploitation. Conduct that is defined as taking non-consensual, unjust, or abusive sexual advantage of another, for one’s own advantage or benefit; or to benefit or advantage anyone other than the person being exploited. Sexual exploitation encompasses a wide range of behaviors including, but not limited to:

(a) inducing incapacitation with the intent to rape or sexually assault another person;
(b) non-consensual video or audio-recording of sexual activity;
(c) allowing others to observe a personal act of consensual sex without knowledge or consent of the partner;
(d) engaging in Peeping Tommy (voyeurism);
(e) knowingly transmitting a sexually transmitted disease, including HIV, to another student;
(f) prostituting another person (i.e. – personally gaining money, privilege, or power from the sexual activities of another person); or
(g) indecent exposure (willfully exposing one’s genitals in any public place, and in the presence of another person).

This definition applies only to Wake Forest students and from the time a student matriculates at Wake Forest and continues until the student is no longer enrolled at Wake Forest. This includes conduct taking place anywhere in the world and is not limited to conduct within Wake Forest’s Education Programs or Activities.

“Supportive Measures” are non-disciplinary, non-punitive, individualized services offered as appropriate, as reasonably available, and without fee or charge to a Claimant and/or a Respondent before or after the filing of a Formal Complaint or where no Formal Complaint has been filed. Such measures are designed to restore or preserve equal access to WFBH’s Education Program or Activity without unreasonably burdening the other party, including measures designed to protect the safety of all parties or WFBH’s educational environment or deter Sexual Harassment and Sexual Misconduct.

Supportive Measures may include, but are not limited to, counseling, extensions of deadlines or other course-related adjustments, modifications of work or class schedules, campus escort services, mutual restrictions on contact between the parties, changes in work or housing locations, leaves of absence, increased security, and monitoring of certain areas of the campus. WFBH will maintain as confidential any Supportive Measures provided to a Claimant or a Respondent, to the extent that maintaining such confidentiality would not impair WFBH’s ability to provide the Supportive Measures. The Title IX Coordinator is responsible for coordinating the effective implementation of Supportive Measures.
SECTION II. TITLE IX SEXUAL HARASSMENT AND NON-TITLE IX SEXUAL MISCONDUCT PRE-HEARING GRIEVANCE PROCEDURES

A. APPLICABILITY, COMPLAINT INTAKE, AND OVERARCHING

PROVISIONS 2A.01 Applicability of Pre-Hearing Grievance Procedures

As noted above, these Pre-Hearing Grievance Procedures apply to allegations of Sexual Harassment in WFBH’s Education Program or Activity (and to related Retaliation, at the discretion of the Title IX Coordinator) and allegations of Sexual Misconduct involving student-respondents. WFBH treats Claimants and Respondents equitably by providing remedies to a Claimant where WFBH makes a determination of responsibility for Sexual Harassment or Sexual Misconduct against a Respondent under the applicable Hearing Procedures outlined in Sections III and IV of this Policy and also by following these Pre-Hearing Grievance Procedures before imposing any disciplinary sanctions against a Respondent for Sexual Harassment or Sexual Misconduct.

2A.02 Obligation to Respond and Initial Outreach to Claimant

When WFBH has Actual Knowledge of Sexual Harassment (or allegations thereof) against a person in the United States in its Education Program or Activity, WFBH is obligated to respond and to follow Title IX’s specific requirements, which are addressed and incorporated in the Pre-Hearing Grievance Procedures and Hearing Procedures set forth in this Policy. WFBH will also follow these Pre-Hearing Grievance Procedures when WFBH has Actual Knowledge of Sexual Misconduct (or allegations thereof).

Promptly upon receiving allegations of Sexual Harassment against a person in the United States in WFBH’s Education Program or Activity or upon receiving allegations of Sexual Misconduct, the Title IX Coordinator will contact the Claimant to discuss the availability of Supportive Measures with or without the filing of a Formal Complaint and to explain to the Claimant the process for filing a Formal Complaint.

2A.03 Filing of a Formal Complaint

As noted in the Definitions section above, a Formal Complaint means a document filed by a Claimant or signed by the Title IX Coordinator alleging Sexual Harassment and/or Sexual Misconduct against a Respondent and requesting that WFBH investigate the allegation(s). At the time of filing a Formal Complaint of Sexual Harassment, a Claimant must be participating in or attempting to participate in WFBH’s Education Program or Activity. A Formal Complaint may be filed with the Title IX Coordinator in person, by mail, or by electronic mail, by using the contact information listed in Exhibit A and the Formal Complaint Form listed in Exhibit B. As used in this paragraph, the phrase “document filed by a Claimant” means a document or electronic submission that contains the Claimant’s physical or digital signature or otherwise indicates that the Claimant is the person filing the Formal Complaint.

When the Title IX Coordinator believes that, with or without the Claimant’s desire to participate in a grievance process, a non-deliberately indifferent response to the allegations or other applicable law requires an investigation, the Title IX Coordinator has the discretion to initiate the grievance process by signing a Formal Complaint. Where the Title IX Coordinator signs a Formal Complaint, the Title IX Coordinator is not a Claimant or otherwise a party under these Grievance Procedures. Furthermore, initiation of a Formal Complaint by the Title IX Coordinator is not sufficient alone to imply bias or that the Title IX Coordinator is taking a position adverse to the Respondent.

Once a Formal Complaint is initiated, a person who was allegedly harmed will be referred to as a “Claimant,” and a person who allegedly caused harm will be referred to as a “Respondent.”

2A.04 Notice of Allegations

Upon receipt of a Formal Complaint, the Title IX Coordinator will provide the Claimant and any known Respondent written notice of these Grievance Procedures and of the allegations of conduct potentially constituting Sexual
Harassment and/or Sexual Misconduct, including sufficient details known at the time and with at least five days to prepare a response before any initial interview. Sufficient details include the identities of the parties involved in the incident, if known, the conduct allegedly constituting Sexual Harassment and/or Sexual Misconduct, and the date and location of the alleged incident, if known. The Title IX Coordinator will also make each party aware of the availability of supportive measures.

The written notice will include a statement that the Respondent is presumed not responsible for the alleged conduct, that the Formal Complaint is presumed to have been filed in good faith, and that a determination regarding responsibility is made at the conclusion of the grievance process. The written notice also will inform the parties that they may have an advisor of their choice, who may be, but is not required to be, an attorney and that at appropriate junctures the parties and their advisors may review and inspect evidence collected during the investigation. The written notice will also advise the parties that they may have a support person of their choosing to support them during the process. Additionally, the written notice will inform the parties of WFBH’s prohibition on knowingly making false statements or knowingly submitting false information during the grievance process.

If, in the course of an investigation, WFBH decides to investigate allegations of Sexual Harassment, Sexual Misconduct, and/or Retaliation involving the Claimant or Respondent that are not included in the original written notice of allegations, WFBH will provide notice of the additional allegations to the parties whose identities are known.

2A.05 Dismissal

WFBH will investigate the allegations in a Formal Complaint; however, WFBH will dismiss a Formal Complaint or a portion of the allegations therein if (1) the conduct alleged in the Formal Complaint, even if substantiated, would not constitute Sexual Harassment or Sexual Misconduct; (2) at the time of filing the Formal Complaint of Sexual Harassment the Claimant was not participating in or attempting to participate in an Education Program or Activity; (3) the Sexual Harassment conduct alleged in the Formal Complaint did not occur in an Education Program or Activity; or (4) the Sexual Harassment conduct alleged in the Formal Complaint did not occur against an individual in the United States. Such a dismissal may take place at the conclusion of the investigation or at any time prior to the conclusion of the investigation.

Additionally, WFBH may dismiss a Formal Complaint or a portion of the allegations therein if (1) the Claimant notifies the Title IX Coordinator in writing that the Claimant would like to withdraw the Formal Complaint or any allegations therein; (2) the Respondent is no longer enrolled or employed at WFBH; or (3) despite efforts to do so, WFBH is unable to gather evidence sufficient to reach a determination as to the Formal Complaint or allegations therein.

In the event the Title IX Coordinator determines that dismissal of a Formal Complaint or a portion of the allegations is appropriate, the Title IX Coordinator will promptly notify the parties in writing of the dismissal and the reasons for it. Dismissal does not impair WFBH’s ability to proceed with any appropriate investigatory or disciplinary actions under this Policy or another WFBH policy or procedure and/or to provide Supportive Measures to the parties.

Within five days of the issuance of the written notice of the dismissal, either party may appeal a decision to dismiss a Formal Complaint or a portion of the allegations by submitting a written appeal to the Title IX Coordinator on the following grounds: (1) procedural irregularity that affected the decision to dismiss; (2) new evidence that was not reasonably available at the time of dismissal and that could affect the outcome of the matter; or (3) the Title IX Coordinator or other participant in the dismissal having a conflict of interest or bias for or against Claimants or Respondents generally or the individual Claimant or Respondent that affected the decision to dismiss.

The Title IX Coordinator will promptly notify the other party of the appeal, and the non-appealing party may submit a response to the appeal within three days of notification of the appeal.

The Title IX Coordinator will appoint an appeal officer and will contemporaneously share the appeal officer’s name and contact information with the Claimant and the Respondent.

Within two days of such appointment, the Claimant, or the Respondent may identify to the Title IX Coordinator in writing alleged conflicts of interest or bias on the part of the appeal officer. The Title IX Coordinator will consider such statements and will promptly assign a different appeal officer if the Title IX Coordinator determines that a material conflict of interest or material bias exists.
The Title IX Coordinator will forward the Formal Complaint and any documents upon which the dismissal decision was based, as well as the appeal and any response to the appeal to the appeal officer.

Within seven days of receipt of those materials, the appeal officer will determine whether any of the grounds for appeal warrant overturning or modifying the dismissal and will issue a written decision to the parties. The decision by the appeal officer is final.

2A.06 Advisors and Support Persons

The Claimant and the Respondent may be accompanied to any meeting or proceeding under this Policy by the advisor of their choice, who may be, but is not required to be, an attorney. WFBH will not limit the choice or presence of the advisor for either the Claimant or the Respondent. Advisors, however, are not allowed to disrupt any meeting or proceeding or to speak on behalf of the Claimant or the Respondent, with the exception of cross-examination during any hearing conducted under Section III of this Policy, which must be conducted by an advisor and never personally by the Claimant or the Respondent.

Parties must provide the name and contact of their advisor to the Title IX Coordinator in writing as soon as reasonably possible and must provide updated information if their advisor changes. All advisors will be required to assent to WFBH’s Expectations for Advisors.

If a party does not have an advisor present at the hearing conducted under Section III of this Policy, WFBH will provide, without any charge to that party, an advisor of WFBH’s choice who may be, but is not required to be, an attorney, to conduct cross-examination on behalf of that party. In such circumstances, the hearing may be postponed until WFBH can provide an advisor to be available at the hearing.

The Claimant and the Respondent may not be accompanied by more than one advisor during meetings or proceedings. The Claimant and Respondent may be accompanied by a support person of their choice during meetings, but such support person will not be permitted in a hearing conducted under Section III of this Policy. A support person is permitted at hearings conducted under Section IV of this Policy. The support person will not be allowed to disrupt any meetings and may not speak on behalf of a party.

2A.07 Student Amnesty

WFBH considers the reporting and adjudication of Sexual Harassment and Sexual Misconduct to be of paramount importance. WFBH does not condone underage drinking or the use of illegal drugs; however, WFBH will extend amnesty to students who are Claimants, Respondents, witnesses, and others involved in a grievance process from punitive sanctioning for illegal use of drugs and/or alcohol when evidence of such use is discovered or submitted in the course of a grievance process. Similarly, WFBH may, in its discretion, provide amnesty for other conduct code violations that are discovered in the course of a grievance process. Notwithstanding the provision of amnesty for students as described in this paragraph, WFBH reserves the right to right to refer Complainants, Respondents, witnesses, and others involved in a grievance process for substance abuse assessment, education, and/or treatment.

2A.08 Timing

WFBH will make reasonable effort to ensure that the investigation and resolution of a Formal Complaint occurs in as timely and efficient a manner as possible. The timelines set forth in these Grievance Procedures are guidelines and may be altered for good cause with written notice to the Claimant and the Respondent of any delay or extension and the reasons for the action. Good cause may include, but is not limited to, considerations such as the absence of a party, a party’s advisor, or a witness; concurrent law enforcement activity; natural disasters, pandemic restrictions, and similar occurrences; or the need for language assistance or accommodation of disabilities.

WFBH will strive to complete its investigation and resolution of a Formal Complaint (not including an appeal, if applicable) within 120 days of the receipt of the Formal Complaint, absent extenuating circumstances. Hearings generally will take place within 30 days of the conclusion of the investigation. Within fourteen days of the conclusion of the hearing, both the Claimant and the Respondent will receive a final outcome letter.

Either party may request an extension of any deadline by providing the Title IX Coordinator or Investigator with a written
request for an extension that includes reference to the duration of the proposed extension and the basis for the request. The Title IX Coordinator will review the request and will make a determination with regard to the request within five days.

2A.09 Written Notice of Meetings

WFBH will provide, to a party whose participation is invited or expected, written notice of the date, time, location, participants, and purpose of all hearings, investigative interviews, or other meetings with sufficient time for the party to prepare to participate.

2A.10 Effect of Corollary Criminal Investigation

WFBH’s investigation may be delayed temporarily while criminal investigators are gathering evidence. In the event of such a delay, WFBH will implement any appropriate Supportive Measures and will evaluate the need for other actions necessary to assist or protect the Claimant, the Respondent, and/or the WFBH community.

Neither the results of a criminal investigation nor the decision of law enforcement to investigate or decline to investigate a matter is determinative of whether a violation of this Policy has occurred.

2A.11 Emergency Removal and Administrative Leave

WFBH may remove a Respondent from WFBH’s Education Program and/or Activity on an emergency basis, provided that WFBH first undertakes an individualized safety and risk analysis, determines that an immediate threat to the physical health or safety of any student or other individual arising from the allegations of Sexual Harassment justifies removal, provides the Respondent with notice and an opportunity to challenge the decision immediately following the removal, and does so in accordance with Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act, as applicable.

Additionally, WFBH may place a non-student employee Respondent on administrative leave during the pendency of WFBH’s response to allegations of Sexual Harassment provided that it does so in accordance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act.

2A.12 Effect of Respondent Withdrawal, Graduation, or Resignation

At the discretion of WFBH, a Respondent who withdraws or resigns from WFBH during the pendency of a grievance process under this Policy may be barred from WFBH property and WFBH activities and events and may be ineligible for re-enrollment or to be re-hired. If a Respondent completes all requirements to graduate during the grievance process, WFBH may hold the Respondent’s diploma until full resolution of the Formal Complaint.

2A.13 Privacy and Disclosure

Except as may be permitted by FERPA or as required by law or to carry out any investigation or resolution under this Policy, WFBH will keep private the identity of any individual who has made a report or complaint of Sexual Harassment or Sexual Misconduct (including any individual who has made a report or filed a Formal Complaint), any Claimant, any Respondent, and any witness.

WFBH may report alleged Sexual Harassment and/or Sexual Misconduct to local law enforcement if warranted by the nature of the allegations at issue, and WFBH administrators will share information regarding alleged Sexual Harassment and/or Sexual Misconduct, as appropriate and necessary, in order to address and resolve the allegation(s) at issue, prevent the recurrence of similar Sexual Harassment and/or Sexual Misconduct, and address the effects of the Sexual Harassment and/or Sexual Misconduct. Additionally, information regarding alleged Sexual Harassment and/or Sexual Misconduct may be used as a statistical, anonymous report for data collection purposes under the Clery Act.

To comply with FERPA, Title IX, and other applicable laws and to provide an orderly process for the presentation and consideration of relevant information without undue intimidation or pressure, grievance processes carried out under this Policy are not open to the general public. Accordingly, documents prepared in connection with such processes; documents, statements, or other information introduced in interviews, meetings, and proceedings; and the final outcome
letter may not be disclosed outside of those processes except as may be required or authorized by law.

As permitted by and subject to the limitations of FERPA, WFBH reserves the right to notify parent(s) or guardian(s) of a student Respondent of the outcome of any investigation involving that Respondent, redacting names of any other students who do not consent to the disclosure of their information. At the written request of a party, WFBH may include a party’s advisor on communications and share access to documents, including the investigation report. This access is subject to the advisor’s acknowledgment and agreement to maintain the confidentiality of the documents. While WFBH strongly encourages parties to maintain privacy in connection with a grievance process, WFBH does not prohibit parties from discussing the allegations under investigation or in any way inhibit the parties from gathering or presenting Relevant Evidence. In addition, WFBH’s policy does not prohibit disclosure of the final outcome letter by either the Claimant or the Respondent. Parties are cautioned, however, that they remain subject to this Policy’s prohibition against Retaliation.

2A.14 Conflicts of Interest, Bias, and Training

WFBH will ensure that any individual designated by WFBH as a Title IX Coordinator, investigator, decision-maker, sanctions officer, appellate officer, or adaptive resolution facilitator under these Grievance Procedures does not have a conflict of interest or bias for or against Claimants or Respondents generally or an individual Claimant or Respondent.

WFBH also ensures that Title IX Coordinators, investigators, decision-makers, sanctions officers, appellate officers, and adaptive resolution facilitators receive training, as applicable, on the definition of Sexual Harassment and Sexual Misconduct; the scope of WFBH’s Education Program or Activity; how to conduct an investigation and grievance process, including hearings, appeals, and informal resolution processes; and how to serve impartially, including by avoiding prejudgment of the facts at issue, conflicts of interest, and bias.

WFBH further ensures that decision-makers receive training on issues of relevance of questions and evidence, including when questions and evidence about the Claimant’s sexual predisposition or prior sexual behavior are not relevant, and that investigators receive training on issues of relevance to create an investigative report that fairly summarizes Relevant Evidence. Additionally, WFBH ensures that decision-makers receive training on any technology to be used at live hearings.

Materials used to train Title IX Coordinators, investigators, decision-makers, sanctions officers, appellate officers, and adaptive resolution facilitators will not rely on sex or gender stereotypes and will promote impartial investigations and adjudications of Formal Complaints of Sexual Harassment and/or Sexual Misconduct.

2A.15 Burden of Proof

At all times, the burden of proof and the burden of gathering evidence sufficient to reach a determination regarding responsibility rest on WFBH, not on either of the parties.

2A.16 Presumption of No Responsibility until Determination

Respondents are presumed to be not responsible for alleged Sexual Harassment until WFBH makes a determination regarding responsibility pursuant to these Grievance Procedures.

2A.17 Objective Evaluation of All Relevant Evidence; Credibility Determinations

The investigators and decision-makers under these Grievance Procedures will objectively evaluate all Relevant Evidence, including both inculpatory and exculpatory evidence, and will not make any credibility determinations based on a person’s status as a Claimant, Respondent, or witness.

2A.18 Academic Freedom

WFBH affirms its commitment to academic freedom but notes that academic freedom does not allow any form of Sexual Harassment or Sexual Misconduct. WFBH recognizes that an essential function of education is a probing of opinions and an exploration of ideas, some of which, because they are controversial, may cause students and others discomfort. This discomfort, as a product of free academic inquiry within a faculty member’s area(s) of expertise, shall in no way be considered or construed to constitute Sexual Harassment or Sexual Misconduct. Academic inquiry may involve teaching, research and extramural speech. Furthermore, nothing in this document shall be interpreted to prohibit bona fide academic
requirements for a specific WFBH program or activity. When investigating complaints that a party, the Title IX Coordinator, or the investigator(s) believes may involve issues of academic freedom, the Title IX Coordinator or investigator(s) will consult two faculty members designated by the Dean of the School of Medicine with respect to contemporary academic practices and standards.

2A.19 Documentation

WFBH will retain documentation (including but not limited to any Formal Complaint, notifications, recording or transcripts of interviews, investigative report, written findings of fact, petitions for appeal, notifications of decisions (including the final outcome letter), audio or audio-visual recordings of hearings, and written communication with the Claimant and Respondent), for no less than seven years.

2A.20 Consolidation of Formal Complaints

WFBH may consolidate Formal Complaints as to allegations of Sexual Harassment and/or Sexual Misconduct against more than one Respondent, by more than one Claimant against one or more Respondents, or by one party against the other party where the allegations of Sexual Harassment and/or Sexual Misconduct arise out of the same facts or circumstances. Where a grievance process involves more than one Claimant or more than one Respondent, references in these Grievance Procedures to the singular “party,” “Claimant,” or “Respondent” include the plural, as applicable.

2A.21 Complex Complaints

When a Formal Complaint is filed containing allegations of both Sexual Harassment and Sexual Misconduct, or allegations of both Sexual Harassment and of other forms of conduct prohibited by other WFBH policies, including but not limited to student codes of conduct or employee policies, all allegations in the Formal Complaint may be addressed in accordance with these Pre-Hearing Grievance Procedures and the Hearing Procedures set forth in Section III of this Policy.

2A.22 Individuals with Disabilities

WFBH will make arrangements to ensure that individuals with disabilities are provided reasonable accommodations, to the extent necessary and available, to participate in WFBH’s grievance processes. Student requests for accommodation must be made to the Learning Assistance Center-Disability Services. All other requests for accommodation must be made to the Human Resources Department.

B. THE INVESTIGATION

2B.01 Appointment of Investigators and Challenging of the Same

Unless a Formal Complaint is dismissed or the parties elect to participate in an Adaptive Resolution Process as set forth in Section V of this Policy, the Title IX Coordinator will promptly appoint one or more investigators. These investigators may be WFBH employees, non-employees, or a combination of the two. The Title IX Coordinator will contemporaneously share the name(s) and contact information with the Claimant and Respondent and also will forward a copy of the Formal Complaint to the investigator(s).

Within two days of such appointment, the Claimant or the Respondent may identify to the Title IX Coordinator in writing any alleged conflicts of interest or bias on the part of the assigned investigator(s). The Title IX Coordinator will consider such statements and will promptly assign a different investigator(s) if the Title IX Coordinator determines that a material conflict of interest or material bias exists.

2B.02 The Investigators’ Activities

Upon receipt of the Formal Complaint, the investigator(s) will promptly begin their investigation, taking such steps as interviewing the Claimant, the Respondent, and witnesses (including expert witnesses, where applicable); summarizing such interviews in writing (or, alternatively, providing access to audio recordings or transcripts of such interviews); collecting and reviewing relevant documents; visiting, inspecting, and taking or reviewing photographs of relevant sites; and collecting and reviewing other Relevant Evidence.
2B.03 The Investigative Report and Evidence Review

The investigator(s) will prepare a written investigative report that fairly summarizes Relevant Evidence and includes items such as the Formal Complaint, written statements of position, summaries or transcripts of all interviews conducted, photographs, descriptions of Relevant Evidence, and summaries or copies of relevant electronic records.

Prior to the completion of the investigative report, the investigator(s) will send or make available to each party and the party’s advisor, if any, an electronic or hard copy of any evidence obtained during the investigation that is directly related to the allegations raised in the Formal Complaint, including (1) any evidence upon which WFBH does not intend to rely in reaching a determination regarding responsibility; and (2) both inculpatory and exculpatory evidence.

The parties have ten days from the time that the evidence is provided to submit to the investigator(s) a written response to the evidence. In the response, the parties may address the relevancy of any evidence that the parties believe should be included in or excluded from the investigative report and may also address any further investigation activities or questions that they believe are necessary. If a party wishes to submit additional evidence at this stage, they should explain how the evidence is relevant and why it was not previously provided.

The investigator(s) will review and consider the parties’ written submissions and may conduct additional investigative activities as appropriate prior to finalizing the investigative report. In the event the additional investigative activities result in new evidence, the investigator(s) will make available this new evidence to each party and the party’s advisor in accordance with the process described above. The parties will have ten days from the time that the new evidence is provided to submit to the investigator(s) a written response to the evidence. The need for additional investigative activities may result in a delay or extension to the timelines set forth in these Grievance Procedures.

At least ten days prior to the hearing, the investigators will send an electronic or hard copy of the investigative report to each party and the party’s advisor, if any. Any response a party wishes to make to the investigative report may be included in that party’s pre-hearing statement, which is discussed more below in Section3A.05.

Due to the sensitive nature of the investigative report, neither the parties nor their advisors may copy, publish, photograph, print, image, record or in any other manner duplicate the report. Parties who violate these restrictions may be disciplined, and advisors who violate these restrictions may be disciplined and/or be barred from further participation in the grievance process.

Nothing in this Policy restricts the ability of either party to discuss the allegations under investigation or to gather, preserve, and/or present Relevant Evidence.

2B.04 Submission of Evidence; Expert Witnesses

Any evidence that the parties wish for the hearing officer to consider should be presented to the investigators as early as possible during the investigation process. Evidence that is not submitted in a timely manner and prior to finalization of the investigative report may be excluded from the hearing at the discretion of the hearing officer.

Similarly, all witnesses should be identified to the investigators as early as possible during the investigation. The hearing officer generally will not call or consider written statements from witnesses who were not identified to investigators and interviewed during the investigation. However, in their discretion and for good cause, the hearing officer may choose to consider information from witnesses who were not interviewed during the investigation.

Any party who wishes to present testimony from an expert witness should identify that witness by providing the witness’s name, contact information and a summary of (1) the witness’s qualifications to offer expert testimony; and (2) any opinions the witness expects to offer related to the allegations or evidence. Any evidence upon which the witness relies must be provided to the investigators and will be made available to the other party and their advisor, as well as to any expert witness the other party has identified. This information must be provided as early as possible in the investigation and in no event later than finalization of the investigative report. The parties must make any expert witnesses available to be interviewed by investigators and to testify at the hearing. If an expert witness is not available to provide live testimony

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9 An expert witness is a person who has the special skills, knowledge, and/or training to provide opinions regarding a particular (and usually technical) subject matter.
at the hearing, the hearing officer must disregard any information submitted by that expert.

2B.05  Treatment Records

WFBH will not access, consider, disclose, or otherwise use in a grievance process any party’s treatment records that are maintained by a physician, psychiatrist, psychologist or other recognized professional or paraprofessional acting in their professional/paraprofessional capacity unless the party provides voluntary, written consent.
SECTION III. TITLE IX SEXUAL HARASSMENT HEARING PROCEDURES

3A.01 Referral for Adaptive Resolution

If, at any time prior to a responsibility determination by the hearing officer, the Title IX Coordinator determines that the matter is appropriate for Adaptive Resolution, the Title IX Coordinator will ask both parties if they wish to suspend the formal resolution process and engage in an Adaptive Resolution process to resolve the allegations without a hearing.

If both parties wish to engage in the Adaptive Resolution process and if the Claimant and the Respondent agree in writing to a resolution through the Adaptive Resolution process, then the Formal Complaint will be resolved without completion of the hearing and without any further rights of appeal by either party.

If the parties are unable to agree to a resolution through the Adaptive Resolution process, the Title IX Coordinator will continue the formal resolution process.

3A.02 The Formal Resolution Process

Unless a Formal Complaint is dismissed or the parties elect to participate in the Adaptive Resolution process pursuant to Section V below, following the investigation the appointed hearing officer will conduct a hearing in which they may question the Claimant, the Respondent, and any witnesses whose testimony the hearing officer deems relevant. During the hearing, the hearing officer and the parties may also question the investigator(s) about the investigative report.

3A.03 Appointment of the Hearing Officer and Challenging of the Same

The Title IX Coordinator will appoint a hearing officer, who will administer the hearing, serve as the decision-maker regarding responsibility, and (as applicable) recommend sanctions. The hearing officer may be a WFBH employee or non-employee. The Title IX Coordinator will contemporaneously share the hearing officer’s name and contact information with the Claimant and the Respondent. The Title IX Coordinator will provide to the hearing officer the Formal Complaint, all evidence directly related to the allegations, the parties’ written responses to the evidence, and the investigative report.

Within two days of such appointment, the Claimant or the Respondent may identify to the Title IX Coordinator in writing any alleged conflicts of interest or bias on the part of the hearing officer. The Title IX Coordinator will carefully consider such statements and will promptly assign a different hearing officer if the Title IX Coordinator determines that a material conflict of interest or material bias exists.

3A.04 Notice of the Hearing

Promptly after the appointment of the hearing officer and no less than seven days prior to the hearing, the hearing officer will provide concurrent written notice to the Claimant and the Respondent setting forth the date, time, and location of the hearing. Any modifications to the hearing date, time, or location will be provided in writing to both parties prior to the date of the hearing.

3A.05 Pre-Hearing Submissions

Each party may submit a written statement to the hearing officer that includes any response the party wishes to make to the investigative report. Each party’s pre-hearing statement must be submitted at least five days prior to the hearing. The hearing officer will share the statement with the other party, who may submit a response within two days.

3A.06 Failure to Appear

If any party or witness fails to appear at the hearing after having been provided proper notice of the hearing as set forth above, then absent extenuating circumstances as determined by the hearing officer, the hearing officer will proceed with the hearing and issuance of their responsibility determination and, as applicable, sanction recommendation. WFBH will provide an advisor to any party who attends the hearing unaccompanied.

3A.07 Evidentiary Matters
A Title IX hearing does not take place within a court of law and is not bound by formal rules of evidence that apply to court proceedings.

Evidence of and questions about the Claimant’s sexual predisposition or prior sexual behavior are not relevant and will not be permitted at the hearing, with the following exceptions: (1) if the questions and evidence about the Claimant’s prior sexual behavior are offered to prove that someone other than the Respondent committed the conduct alleged by the Claimant; or (2) if the questions and evidence concern specific incidents of the Claimant’s prior sexual behavior with respect to the Respondent and are offered in an effort to prove Consent.

Evidence regarding the Respondent’s past sexual activity (regardless of whether the Respondent was formally investigated or found responsible for such conduct) may be permitted to show that the Respondent has engaged in a pattern of behavior similar to the alleged Sexual Harassment at issue before the hearing officer, provided that the Respondent has not been found “not responsible” by WFBH in a proceeding related to such conduct.

The hearing officer may also exclude evidence if the hearing officer determines that the proffered evidence’s probative value is outweighed by needlessly presenting cumulative evidence or that a question is posed solely to harass a witness or the other party.

As explained in Section 2B.05, WFBH will not access, consider, disclose, or otherwise use in a grievance process any party’s treatment records that are maintained by a physician, psychiatrist, psychologist or other recognized professional or paraprofessional acting in their professional/paraprofessional capacity unless the party provides voluntary, written consent.

WFBH will make the evidence that the investigators provided to the parties for their review and inspection prior to finalization of the investigative report available at the hearing to give each party equal opportunity to refer to such evidence during the hearing, including for purposes of cross-examination.

3A.08 Hearing Format and Questioning of Witnesses and Parties

The hearing will be conducted with parties in separate rooms, using technology to ensure that each party can see and hear any party or witness answering questions. At the discretion of the hearing officer, the hearing may be conducted partially or entirely remotely, with any or all participants participating virtually.

The Claimant and the Respondent will have equal opportunity to address the hearing officer with an opening statement, if desired, and both the hearing officer and the parties’ advisors will have the opportunity to question the other party and any witnesses, including investigators and expert witnesses. Following any opening statements, the hearing officer will first ask any questions of each party and each witness through direct examination. After the hearing officer has completed direct examination, the advisor for the Claimant will have an opportunity to conduct a cross-examination of the Respondent, and afterwards, the advisor for the Respondent will have the opportunity to conduct cross-examination of the Claimant. The hearing officer will determine the order of witnesses and questioning of the witnesses by the advisors for the parties. Any questions that a party has for a witness or the other party must be posed by the party’s advisor. A party’s advisor will not have the opportunity to question the party for whom they serve as advisor.

Before a party or witness answers a cross-examination question, the hearing officer will determine whether the question is Relevant and allowed under this Policy. The hearing officer will explain any decision to exclude a question.

Members of the WFBH community are expected to provide truthful testimony, and any member of the WFBH community who knowingly provides false information or testimony during this process is subject to discipline.

3A.09 Unavailability or Refusal to Testify or Submit to Cross-Examination

The Respondent and/or the Claimant may choose not to testify at the hearing; however, the exercise of that option will not preclude the hearing officer from making a responsibility determination.

If a party or witness does not submit to cross-examination at the hearing, in reaching a responsibility determination, the hearing officer may afford relevant statements made by that party or witness the weight that the hearing officer deems appropriate, taking into consideration factors such as the nature of the statement, the context in which the party or witness made the statement, and any other factor the hearing officer deems appropriate.
The hearing officer will not draw an inference regarding responsibility based solely on a party's or witness' absence from the hearing or refusal to testify or submit to cross-examination.

3A.10 Recording

WFBH will create an audio or audio-visual recording the hearing. This recording will be the only recording permitted of the proceedings and will be the property of WFBH. The parties and the appeal officer may use the recording as part of the appeal process. Reasonable care will be taken to ensure a quality recording; however, technological problems that result in no recording or in an inaudible one will not affect the validity of the outcome of a hearing.

3A.11 The Determination of the Hearing Officer Regarding Responsibility

Following the hearing, the hearing officer will determine whether the evidence establishes that it is more likely than not\(^\text{10}\) that the Respondent committed Sexual Harassment or, in the context of a Complex Case, otherwise violated this Policy or other WFBH policies. The hearing officer will render a finding of “Responsible” or “Not Responsible” and will provide the rationale for the decision. If the Respondent is found “Responsible,” the hearing officer will specify the specific type(s) of conduct for which the Respondent is found “Responsible” (for example, Sexual Assault, Stalking, etc.). When feasible, the hearing officer will orally communicate the finding of “Responsible” or “Not Responsible” to the parties on the day of or day following the hearing. Additional information regarding the decision, including the rationale, will be communicated to the parties in the final outcome letter (as described below).

3A.12 Determination Regarding Sanctions

If the hearing officer determines that the Respondent is “Responsible,” the hearing office will provide findings of fact in support of the hearing officer’s determination and the rationale for the determination to the Title IX Coordinator. The Title IX Coordinator will then provide this information to the appropriate Sanctions Officer, as delineated below, and the Sanctions Officer will determine the sanction(s) to be imposed.

In determining sanctions, the Sanctions Officer will consider: (a) the nature and severity of the misconduct; (b) whether a sanction will bring an end to, prevent a recurrence of, or remedy the effects of the Sexual Harassment; (c) the impact of separating a student from their education; and (d) any prior disciplinary history of a Respondent. In addition, the Sanctions Officer may consider aggravating or mitigating factors. The appropriate sanctions for Sexual Assault generally will include at a minimum a period of separation from WFBH. The Sanctions Officer will also consult with the Title IX Coordinator regarding WFBH’s history of sanctions in similar cases.

Sanctions for Respondents who are employees may include, but are not limited to, a written warning, withholding a promotion or pay increase, reassigning employment, terminating employment (including loss of tenure), temporary suspension without pay, compensation adjustments, completion of an intervention or training program, and/or completion of violence risk assessment.

Sanctions for Respondents who are students may include, but are not limited to, expulsion or suspension from WFBH, disciplinary probation, social restrictions, parental notification, education sanctions (such as community service, reflection paper(s), and/or fines), suspension or revocation of admission, suspension from a program, and/or withholding or revocation of a degree(s).

The appropriate Sanctions Officer is determined by the Respondent’s status:

<table>
<thead>
<tr>
<th>Respondent Status</th>
<th>Sanctions Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student</td>
<td>Dean of the Student’s College or School or designee</td>
</tr>
<tr>
<td>Faculty Member</td>
<td>Dean of the Faculty Member’s College or School or designee</td>
</tr>
<tr>
<td>Staff Member</td>
<td>Chief Human Resources Officer or designee</td>
</tr>
</tbody>
</table>

\(^{10}\) In other words, the standard of proof will be the preponderance of the evidence standard.
The Sanctions Officer will forward their sanctions determination to the Title IX Coordinator, who will share it with the hearing officer for inclusion in the final outcome letter, as described in Section 3A.14.

3A.13 Implementation of Sanctions

Sanctions are effective immediately upon issuance of the final outcome letter described below. However, if necessary to protect the welfare of the Claimant, Respondent, or the WFBH community, the Sanctions Officer may recommend and/or the Title IX Coordinator may determine that any sanctions are effective at any time after the conclusion of the hearing and continue in effect until the issuance of the final outcome letter.

3A.14 Final Outcome Letter

Within fourteen days after the hearing, the hearing officer will issue a final outcome letter through the Title IX Coordinator to the Respondent and Claimant simultaneously.

The final outcome letter will (1) name the Respondent; (2) identify the allegations potentially constituting Sexual Harassment; (3) describe procedural steps taken from the filing of the Formal Claimant through the determination; (4) provide findings of fact in support of the hearing officer’s determination; and (5) provide a statement of rationale for the result as to each allegation, including the responsibility determination and any sanctions.

3A.15 Appeals

The Claimant or the Respondent may appeal the decision of the hearing officer regarding responsibility and/or the sanction(s) imposed on the Respondent.

The following are the only permissible grounds for an appeal of the hearing officer’s responsibility determination: (1) procedural irregularity that affected the outcome; (2) new evidence that was not reasonably available at the time of the determination and that could affect the outcome; and (3) the Title IX Coordinator, an investigator, or the hearing officer had a conflict of interest or bias that affected the outcome.

Sanctions may only be appealed on the ground that the severity is incommensurate to the gravity of the Sexual Harassment for which the Respondent was found responsible.

Appeals must be submitted in writing to the Title IX Coordinator within five days from the date of the final outcome letter. The Title IX Coordinator will promptly inform the other party of the filing of the appeal. The other party will have three days from such notification to submit a written response to the appeal.

3A.16 Appointment of the Appeal Officer and Challenging of the Same

Upon receipt of an appeal, the Title IX Coordinator will appoint an appeal officer.

Within two days of such appointment, the Claimant or the Respondent may identify to the Title IX Coordinator in writing alleged conflicts of interest or bias posed by assigning that appeal officer. The Title IX Coordinator will carefully consider such statements and will promptly assign a different appeal officer if the Title IX Coordinator determines that a material conflict of interest or material bias exists.

3A.17 Appellate Review

The Title IX Coordinator will share the Formal Complaint, the investigative report, the hearing recording, all statements introduced at the hearing, any other evidence considered by the hearing officer, the hearing officer’s written findings, and the written appeal submissions with the appeal officer. In addition, if an appeal raises procedural issues, the Title IX Coordinator may provide the appeal officer additional information relevant to those issues.

Within ten days of the receipt of the appeal the appeal officer will determine (a) that the decision of the hearing officer should stand; or (b) that the decision of the hearing officer should be overturned and will issue a written explanation of that result and the rationale behind it.
In the event that the appeal officer determines that the decision of the hearing officer should be overturned, the appeal officer will specify, after consultation with the Title IX Coordinator and other WFBH administrators as necessary, the appropriate steps to be taken to come to a final resolution of the Formal Complaint (which may include another hearing before the same hearing officer or a different one).
SECTION IV. NON-TITLE IX SEXUAL MISCONDUCT HEARING GRIEVANCE PROCEDURES FOR STUDENT-RESPONDENTS

4A.01 Referral for Adaptive Resolution

If, at any time prior to a responsibility determination by the hearing officer, the Title IX Coordinator determines that the matter is appropriate for Adaptive Resolution, the Title IX Coordinator will ask both parties if they wish to suspend the formal resolution process and engage in an Adaptive Resolution process to resolve the allegations without a hearing.

If both parties wish to engage in the Adaptive Resolution process and if the Claimant and the Respondent agree in writing to a resolution through the Adaptive Resolution process, then the Formal Complaint will be resolved without completion of the hearing and without any further rights of appeal by either party.

If the parties are unable to agree to a resolution through the Adaptive Resolution process, the Title IX Coordinator will continue the formal resolution process.

4A.02 Hearing Board

WFBH’s Sexual Misconduct Hearing Board is composed of faculty and staff who have received training as described in Section 2A.14 of this Policy.

When a request for a Sexual Misconduct Hearing is made, the Title IX Coordinator, or designated investigator, will select a Chairperson in addition to a three-member Hearing Panel from the Sexual Misconduct Hearing Board to determine whether the Respondent is responsible for Sexual Misconduct that is prohibited by this Policy.

4A.03 Student Sexual Misconduct Hearing Process

Unless a Formal Complaint is dismissed or the parties elect to participate in the Adaptive Resolution process pursuant to Section VI below, following the investigation the hearing panel will conduct a hearing in accordance with this process.

4A.03(i) Arrangements for the Hearing. Arrangements may be made for the Claimant and/or the Respondent who do not wish to be in the hearing room with the opposing party at the same time. This accommodation may include audio conferencing or videoconferencing. All accommodation requests must be made to the Title IX Coordinator at least three (3) calendar days in advance of the hearing.

4A.03(ii) Role of Advisors and Support Persons. Claimants and Respondents may each have one advisor and one support person of their choosing at the hearing, but the roles of the advisor and the support person are strictly limited to providing advice and/or support to the Claimant and the Respondent. Advisors and support persons are prohibited from directly asking questions, arguing, or presenting information or evidence during the hearing. Advisors and support persons may be removed from the hearing at the direction and in the discretion of the Chairperson if the advisor and/or support person(s) disrupt the hearing.

4A.03(iii) Investigation Summary: The Title IX investigator assigned to the complaint will provide a brief summary of the allegations. Following the summary, the Hearing Panel may ask questions to the Title IX investigator. Claimant and Respondent may submit questions to the Chairperson in writing, for the Hearing Panel to then ask the Title IX investigator, which the Chairperson may choose to rephrase or omit.

4A.03(iv) Claimant’s Case: The Claimant has the option, but is not required, to provide a brief verbal or written opening statement setting forth the charges alleged. If the opening statement is written, the Hearing Chairperson may, in its discretion, read it out loud upon request by the Claimant. Following an opening statement, the Claimant may present evidence by being available for questioning by the Hearing Panel; may request the Hearing Panel to call their witnesses; and may submit questions in writing to the Chairperson for the Hearing Panel to ask, which the Chairperson may choose to rephrase or omit.

Once the Hearing Panel has completed its questioning, the Respondent may submit written questions to the Chairperson to consider and if deemed relevant and not otherwise redundant, submit to the Hearing Panel.
4A.03(v) Respondent’s Case: The Respondent has the option, but is not required, to provide a brief verbal or written opening statement setting forth Respondent’s reply to the charges alleged. If the opening statement is written, the Hearing Chairperson may read it out loud upon request of the Respondent. No questions may be asked during the opening statements. Following the opening statement, the Respondent may present evidence by being available for questioning by the Hearing Panel; may request the Hearing Panel to call their witnesses; and may submit questions in writing to the Chairperson for the Hearing Panel to ask, which the Chairperson may choose to rephrase or omit.

Once the Hearing Panel has completed its questioning, the Claimant may submit written questions to the Chairperson to consider and, if deemed relevant and not otherwise redundant, submit to the Hearing Panel.

While both parties may have already provided the Chairperson with questions to be asked by the Hearing Panel. If either party would like additional questions asked, they must be submitted in writing and provided to the Chairperson during the hearing.

4A.03(vi) Submission of Questions to the Hearing Panel. As stated above, prior to and during the hearing, the Claimant and the Respondent may submit questions to the Chairperson to be asked of each other and the witnesses testifying before the hearing panel. The Claimant and the Respondent are prohibited from directly asking questions. This prohibition extends to advisors and support persons of Complainants and Respondents. The Hearing Chairperson will make decisions regarding Relevant Evidence as explained below, and has sole discretion to whether questions may be asked in full, in part, or omitted entirely.

4A.03(vii) Determinations Regarding Relevant Evidence. As part of a hearing, the Chairperson of the Hearing Panel will make decisions regarding Relevant Evidence.

4A.04(iv) Deliberations: Once the statements have been completed, the parties will be dismissed and the Hearing Panel will begin its deliberations. The Hearing Chairperson is a non-voting facilitator of the Hearing Panel’s deliberations. The Hearing Panel will evaluate the evidence and decide, based on a preponderance of the evidence, whether the Respondent is responsible for Sexual Misconduct. “Preponderance of the evidence standard” means that the Respondent student will be found responsible if, based upon the entirety of the evidence presented during the hearing, it is determined that the Respondent student “more likely than not” committed the offense in question. A decision is reached by a majority of the Hearing Panel.

4A. Sanctions

If there is a finding of responsibility, the Hearing Panel will, in consultation with the Dean of Students in the College or relevant School or their respective designee, determine the sanctions to be imposed. Sanctions for a finding of responsibility depend on the nature and the gravity of the Sexual Misconduct. Sanctions may include, but are not limited to expulsion or suspension from WFBH, disciplinary probation, social restrictions, parental notification, education sanctions (such as community service, reflection paper(s), and/or fines), suspension or revocation of admission, suspension from a program, and/or withholding or revocation of a degree(s). Sanctions imposed by the Hearing Panel will remain in effect pending the outcome of any appeal process.

4A. Determination Letter

Within fourteen days after the hearing, the Hearing Chairperson will issue a determination letter through the Title IX Coordinator to the Respondent and Claimant simultaneously. The determination letter will (1) name the Respondent; (2) identify the allegations potentially constituting Sexual Misconduct; (3) provide a summary of the findings of fact in support of the Hearing Panel’s determination; and (4) provide a statement of rationale for the responsibility determination and any sanctions.

4A. Appeals

The Claimant or the Respondent may appeal the decision of the Hearing Panel regarding responsibility and/or the sanction(s) imposed on the Respondent.

The following are the only permissible grounds for an appeal of the Hearing Panel’s responsibility determination:
(1) procedural irregularity that affected the outcome; (2) new evidence that was not reasonably available at the time of the determination and that could affect the outcome; and (3) the Title IX Coordinator, an investigator, or the hearing officer had a conflict of interest or bias that affected the outcome.

Sanctions may only be appealed on the ground that the severity is incommensurate to the gravity of the Sexual Misconduct for which the Respondent was found responsible.

Appeals must be submitted in writing to the Title IX Coordinator within five days from the date of the determination letter. The Title IX Coordinator will promptly inform the other party of the filing of the appeal. The other party will have three days from such notification to submit a written response to the appeal.

4A.07 Appointment of the Appeal Officer and Challenging of the Same

Upon receipt of an appeal, the Title IX Coordinator will appoint an appeal officer.

Within two days of such appointment, the Claimant or the Respondent may identify to the Title IX Coordinator in writing alleged conflicts of interest or bias posed by assigning that appeal officer. The Title IX Coordinator will carefully consider such statements and will promptly assign a different appeal officer if the Title IX Coordinator determines that a material conflict of interest or material bias exists.

4A.08 Appellate Review

The Title IX Coordinator will share the Formal Complaint, the investigative report, the hearing recording, all statements introduced at the hearing, any other evidence considered by the Hearing Panel, the Hearing Panel’s determination letter, and the written appeal submissions with the appeal officer. In addition, if an appeal raises procedural issues, the Title IX Coordinator may provide the appeal officer additional information relevant to those issues.

Within ten days of the receipt of the appeal the appeal officer will determine (a) that the decision of the hearing officer should stand; or (b) that the decision of the hearing officer should be overturned and will issue a written explanation of that result and the rationale behind it.

In the event that the appeal officer determines that the decision of the hearing officer should be overturned, the appeal officer will specify, after consultation with the Title IX Coordinator and other WFBH administrators as necessary, the appropriate steps to be taken to come to a final resolution of the Formal Complaint (which may include another hearing before the same hearing officer or a different one).
SECTION V. ADAPTIVE RESOLUTION

5A.01 Availability of Adaptive Resolution

At any time before the issuance of a responsibility determination, the parties may elect to resolve the Formal Complaint through the adaptive resolution process, provided that (1) the parties both voluntarily consent in writing to such resolution; (2) both parties are students or employees of WFBH; and (3) the Title IX Coordinator determines that adaptive resolution is an appropriate mechanism for resolving that specific Formal Complaint. Otherwise, a Formal Complaint that is not dismissed will proceed to a hearing. Adaptive resolution is not an appropriate mechanism for resolving a Formal Complaint by a student against an employee.

Adaptive resolution may not be selected for less than all of the misconduct alleged in the Formal Complaint. If the parties agree to adaptive resolution (and adaptive resolution is appropriate for all of the allegations at issue), then all of the allegations must be resolved according to the adaptive resolution process.

Either party has the right to terminate the adaptive resolution process at any time and proceed with formal resolution (i.e., a full investigation and hearing). Furthermore, the Title IX Coordinator may, where appropriate, terminate adaptive resolution and proceed with the formal resolution process instead.

5A.02 Notice of Allegations and Notice of Adaptive Resolution and Facilitator

The Title IX Coordinator will provide the parties a written notice disclosing the Formal Complaint’s allegations and the requirements of the adaptive resolution process, including any circumstances under which WFBH would preclude the parties from resuming a Formal Complaint arising from the same allegations.

When the Formal Complaint is to be resolved according to the adaptive resolution process, the Title IX Coordinator will designate a trained individual to serve as the adaptive resolution facilitator. The Title IX Coordinator will contemporaneously share the name of the adaptive resolution facilitator with the Claimant and the Respondent.

Within two days of such notification, the Claimant or Respondent may identify to the Title IX Coordinator in writing alleged conflicts of interest or bias posed by assigning that facilitator. The Title IX Coordinator will carefully consider such statements and will promptly assign a different facilitator if the Title IX Coordinator determines that a material conflict of interest or material bias exists.

5A.03 Adaptive Resolution

The adaptive resolution facilitator will meet separately with each party to review the process and the allegations in the Formal Complaint and to identify the outcome that each party seeks from the adaptive resolution process. If the facilitator determines that it would be productive for both parties to attend a resolution meeting, the facilitator will provide written notice to the Claimant and the Respondent setting forth the date, time, and location of that meeting. At the request of either party or at the discretion of the adaptive resolution facilitator, the meeting may occur with the parties in different locations or meetings with parties may take place on different dates.

Both the Claimant and the Respondent are expected to participate in the adaptive resolution process. If either party fails to participate, the Title IX Coordinator may direct that the Formal Complaint be resolved using a full investigation and hearing or may reschedule the meeting.

During adaptive resolution, the parties may: (1) engage one another in the presence of, and/or facilitated by, the facilitator; (2) communicate their feelings and perceptions regarding the incident and the impact of the incident (either by communicating directly with one another or by communicating indirectly through the facilitator); (3) relay their wishes and expectations regarding the future; and/or (4) come to an agreed-upon resolution of the allegations in the Formal Complaint.

Participation in the adaptive resolution process is completely voluntary, and either party, the facilitator, or the Title IX Coordinator may terminate the process at any time.
5A.04 Resolution

The facilitator will attempt to facilitate the parties’ resolution of the Formal Complaint. If this process results in a resolution between the parties and the Title IX Coordinator finds the resolution to be appropriate under the circumstances (giving consideration to factors including the extent to which the resolution will protect the safety of the Claimant and the entire WFBH community), the resolution will be reduced to writing, which will conclude the process and closing of the Formal Complaint.

5A.05 Written Resolution Agreement

To be effective, any agreement reached during the adaptive resolution process must be memorialized in writing and signed by the parties, the facilitator, and the Title IX Coordinator. The Respondent must complete all measures agreed to in the written resolution agreement, and compliance will be monitored by the Title IX Office. If the Respondent completes all measures agreed to in the written resolution agreement, no further process is available with regard to the allegations in the Formal Complaint. If a Respondent fails to complete all measures, the Claimant or the Title IX Coordinator may refile the Formal Complaint and resume the formal resolution process.

Measures that parties agree to in the informal resolution process may include (but are not limited to):

1) Alcohol education classes for the Respondent;
2) Completion of online sexual harassment training;
3) Regular meetings with an appropriate individual, unit or resource;
4) Permanent or temporary no contact order;
5) Restrictions for participation in certain activities, organizations, programs or classes;
6) Change in residential assignment or restrictions on access to certain residence halls or apartments;
7) Restriction of participation in certain events;
8) Reflection paper or written apology; or
9) The Respondent’s completion of an educational or behavioral plan.

5A.06 Termination of Adaptive Resolution Process

At any time prior to completing a written resolution agreement, any party has the right to withdraw from the adaptive resolution process and resume the grievance process with respect to the Formal Complaint. If either party terminates the adaptive resolution process or the Title IX Coordinator determines that the adaptive resolution process is no longer appropriate, the formal resolution process outlined above will promptly resume.

5A.07 Confidentiality of Information Shared

Information shared by students during an adaptive resolution process will not result in separate or subsequent disciplinary investigation or actions by WFBH unless WFBH determines in its reasonable discretion that there is a threat of harm or safety to self or others.

5A.08 Appeal

A resolution reached pursuant to the adaptive resolution process is final and not subject to appeal.

5A.09 Records

The Title IX Coordinator will retain a record of the written resolution agreement for no less than seven years.
EXHIBIT A

Suggested Actions for People Who Have Experienced Sexual Harassment

If you have experienced Sexual Harassment, WFBH’s first priority is to help you take steps to address your safety, medical needs and emotional well-being. You are encouraged to take the following actions, as applicable, regardless of whether you have made a decision about whether to pursue a criminal or WFBH complaint.

1. Ensure Your Physical Safety.

You may seek help from local law enforcement agencies or by contacting the Wake Forest Baptist Medical Center Security Services. The Wake Forest Baptist Medical Center Security Services can assist you with contacting local law enforcement and can help you obtain transportation to the local law enforcement office. Officers are on duty at the Wake Forest Baptist Medical Center Security Services 24 hours a day, seven days a week.

2. Seek Medical Assistance and Treatment.

To seek medical assistance, you can go to a hospital emergency room, clinic, your primary care physician, or Student Health Service (if you are a Reynolda campus student). Local options for medical care include the following:

- **Wake Forest Baptist Medical Center [Confidential]**
  - 1 Medical Center Boulevard, Winston-Salem, NC 27157
  - 336.716.2011
- **Novant Health Forsyth Medical Center [Confidential]**
  - 799 North Highland Avenue, Winston-Salem, NC 27101
  - 336.703.3100
- **Forsyth County Health Department [Confidential]**
  - 799 North Highland Avenue, Winston-Salem, NC 27101
  - 336.703.3100

It is crucial that you obtain medical attention as soon as possible after a sexual assault, for example, to determine the extent of physical injury and to prevent or treat sexually transmitted diseases (such as HIV). Medical facilities can also screen for the presence of sedative drugs such as Rohypnol or GHB (date-rape drugs).

If you choose to have an evidence collection kit (or “rape kit”) completed, it is important to do so within 120 hours.

Even if you have not decided whether to file charges, it is advisable to have the evidence collection kit completed so that you can better preserve the options of obtaining a protective order and/or filing criminal charges at a later date.

3. Obtain Emotional Support

Counseling and Well-Being Services and the Chaplain’s Office can help students sort through their feelings and begin the recovery process. The professionals at Counseling and Well-Being Services and the Chaplain’s Officer are trained to provide crisis intervention on short-term and emergency issues. These offices can also provide referral services for outside providers and law enforcement. Counseling is free of charge to all students. In some instances, the law may require the disclosure of information shared by students with counselors.

However, absent a legal mandate to the contrary, counseling services are strictly confidential, are not part of students’ records, and will not be reported to other WFBH personnel.

Employees may contact the Employee Assistance Program to obtain emotional support (available at: 336.716.5493).
Employees can also speak confidentially with an ombudsperson (Jeff Weiner, PhD, FacultyOmbuds@wakehealth.edu).

4. Obtain Information/Report Misconduct

You are encouraged to report incidents of sexual assault to WFBH’s Title IX Coordinator (even if you have filed a report directly with law enforcement). The Title IX Coordinator can help you access resources and can provide you with support and information, including information on WFBH’s procedures for investigating and addressing instances of sexual assault.

Important Contact Information Resources for Parties

Title IX Coordinator: titleixcoordinator@wfu.edu
834 Wake Forest Road
Reynolda Hall, Suite 307
Winston-Salem, NC 27109

Aishah Casseus, Director Title IX
336.758.4997 | telligjr@wfu.edu

Jessica Harris Telligman, Assistant Director Title IX
336.758.4997 | telligjr@wfu.edu

Sarah Riney, Deputy Title IX Coordinator
336.713.3352 | sriney@wakehealth.edu

Tanya Gregory, Deputy Title IX Coordinator
336.713.0819 | tgregory@wakehealth.edu

Wake Forest Baptist Medical Center Security Services (Non-Confidential)
Medical Center Blvd., Winston-Salem, NC 27157
Emergencies: 336.716.1111
Non-Emergencies: 336-716-3305

Winston-Salem Police Department (Non-Confidential)
• North Cherry Street
Winston-Salem, NC 27101
• Emergencies: 911
• Non-emergencies: 336.773.7700 725

Wake Forest Baptist Medical Center Human Resources
Employee Relations Manager, HR Client Partnerships
Tonya.Robbins@wakehealth.edu

Counseling and Well-Being Services [Confidential] 336.758.5273 | counselingservices@wakehealth.edu Bowman Gray Center for Medical Education, 3rd floor, 1213

Office of Chaplain [Confidential]
Michelle Nicolle  
336.713.9766 | mnicolle@wakehealth.edu  
Bowman Gray Center for Medical Education, 3rd floor, 1213  
Employee Assistance Program (EAP) [Confidential]  
336.716.5493

**Additional Community Resources**

Wake Forest Baptist Medical Center [Confidential]  
1 Medical Center Boulevard, Winston-Salem, NC 27157  
336.716.2011

Novant Health Forsyth Medical Center [Confidential]  
3333 Silas Creek Parkway, Winston-Salem, NC 27103  
336.718.5000

Forsyth County Health Department [Confidential]  
799 North Highland Avenue, Winston-Salem, NC 27101  
336.703.3100

Family Services, Inc. [Confidential]  
1200 Broad Street, Winston-Salem, NC 27101  
336.722.8173 or 1.800.316.5513  
24 Hour Crisis Line for Sexual Assault: 336.722.4457  
24 Hour General Crisis Line: 336.723.8125 info@fsifamily.org
**Student Substance Abuse Policy**

1) **GENERAL POLICY STATEMENT:**

The Wake Forest School of Medicine (WFSM) and the Graduate School of Arts and Sciences, Biomedical Sciences, (hereinafter jointly referred to as “School”) are committed to providing a safe, healthy learning community for all its members. The School recognizes that the unlawful possession, use, or distribution of illicit drugs and unlawful or excessive use of alcohol by students may interfere with the mission of Wake Forest Baptist Health by negatively affecting the health and safety of its patients, visitors, students, faculty, staff, and research subjects. In accordance with the Drug-Free Schools and Communities Act, and to comply with the Drug-Free Schools and Campuses Regulations (EDGAR Part 86.100, Subpart B), this policy addresses the annual written notification to students of the following: standards of conduct, possible legal sanctions and penalties, statements of the health risks associated with alcohol and other drug use (AOD), the School’s AOD programs available to students, and the disciplinary sanctions for violations of the standards of conduct. The School participates in the biennial review with Wake Forest University in providing confidential information which does not violate FERPA.

   a) Scope: All students of the School are responsible for complying with this policy

   b) Responsible Department/Party/Parties:

      Policy Owner: Assistant Dean, Medical Education Administration
      Procedure: Assistant Dean, Medical Education Administration
      Implementation: Program Manager as defined below

2) **DEFINITIONS:** For purposes of this Policy, the following terms and definitions apply:

   a) WFBMC: Wake Forest Baptist Health and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), all on-site subsidiaries as well as those off-site governed by WFBMC policies and procedures.

   b) The term “student” is defined as a person who matriculates into, is enrolled in, or is taking courses in an educational program of Wake Forest School of Medicine or Graduate School of Arts and Sciences, Biomedical Sciences (hereinafter jointly referred to as “School”).

   c) Program Managers of applicable programs are defined as follows:

      **Certified Registered Nurse Anesthesia Program:** Program Director
      **Graduate School of Arts & Sciences, Biomedical Sciences:** Dean, Graduate School of Arts & Sciences, Biomedical Sciences
      **Physician Assistant Program:** Program Director
      **Undergraduate Medical Education (MD) Program:** Senior Associate Dean for Health Care Education

   d) Illegal use of drugs/alcohol: The unlawful manufacture, distribution, disposition, possession, and/or use of a controlled substance or alcohol as regulated by federal, state, and local laws. Misdemeanor and felony convictions for violating these laws can result in criminal penalties. Such penalties can range from fines and probation to denial or revocation of federal benefits (such as financial aid) to imprisonment and forfeiture of personal and real property.

   An illegal drug is a controlled substance as defined by Title 21 US Code (USC) Controlled Substances Act, i.e., Subchapter I, Part A, Section 802, Subchapter I, Part B, Section 812, Part 1308 (Schedules I-V) and the North Carolina Controlled Substances Act: G.S. 90-86 through G.S. 90-113.8
An overview of federal laws governing the manufacture, possession, use and distribution of alcohol and illegal drugs is available at: https://niaaa.nih.gov/alcohol-health/alcohol-policy; and Title 21 US Code (USC) Controlled Substances Act, i.e., Subchapter I, Part D; Subchapter I, Part A; and Subchapter I, Part C.

A summary of North Carolina alcohol and drug laws is available from the North Carolina General Statutes (G.S.) 18B-301, G.S. 18B-302, G.S. 18B-401; G.S. 20-138.1; and Article 5, North Carolina Controlled Substances Act: G.S. 90-86 through G.S. 90-113.8

Illegal drugs can include:
   i. Prescription drugs unless validly prescribed by a student’s health care provider,
   ii. Substances never intended for human consumption (such as glue)

   e) Under the influence: affected by alcohol and/or other drugs or has recently consumed alcohol and/or other drugs in any detectable manner.

   f) Trafficking in Illegal Drugs: The term “trafficking” is used in its generic sense, not in its specific application to selling, manufacturing, delivering, transporting, or possessing controlled substances in specified amounts as referenced in Article 5, North Carolina Controlled Substances Act.

   g) Abusive use of alcohol or drugs: alcohol or drugs, whether available legally (such as cough syrup or other over-the-counter medications) or drugs for which a student has a valid prescription, that are taken or used in a manner not prescribed or inconsistent with recommended use.

3) POLICY GUIDELINES:

a) Annual Notification: This policy will be distributed in writing to all students to meet the annual notification requirement. Contents of the annual notification will include: standards of conduct, possible legal sanctions and penalties, statements of the health risks associated with alcohol and other drug use (AOD), the School’s AOD programs available to students, and the disciplinary sanctions for violations of the standards of conduct.

b) Standards of Conduct:

   i. The School prohibits the illegal use or the abusive use of alcohol or other legal drugs by any student on School property or at events that utilize the School’s name (i.e., Medical School Prom).

   ii. In accordance with local, North Carolina and Federal laws, the School prohibits the unlawful possession, use, manufacture, sales, or distribution of illegal drugs or drug paraphernalia by any student. **North Carolina law includes marijuana in the list of illegal drugs** (North Carolina Controlled Substances Act, G.S. 90-94).

   iii. The School prohibits its students from using prescription medications not prescribed for them. Students are expected to use only those prescription medications that are prescribed for them within the confines of a provider/patient relationship.

   iv. The School prohibits its students from attending classes, participating in clinical rotations, or otherwise participating in or attending School or WFBMC activities or functions while under the influence of alcohol, chemicals, or drugs, including legally obtained prescription drugs, which impair one’s ability to perform normal activities.

   v. **Students must successfully pass the urine drug screening test administered during matriculation. As marijuana is not legal in the State of North Carolina, the urine drug screening will test for the presence of this substance.**
vi. Students must comply with North Carolina state and federal law regarding alcohol. It is unlawful for any person less than 21 years of age to purchase or possess any alcoholic beverage. It is against the law for anyone to sell or give any alcoholic beverage to a person under 21 or to aid or abet such person in selling, purchasing or possessing any alcoholic beverage.

vii. Institutional funds will not be used for the purchase of alcohol for student-sponsored events.

viii. Student organizations can significantly improve personal safety and reduce liability by not providing alcohol to any person. If alcohol is to be present at a student-sponsored activity, the student organization will provide for the safety of the attendees and reduce its liability by ensuring that:

- Alcohol is not the focus of the event;
- Attractive alternative beverages are provided;
- Procedures are in place to prevent transfer, service, or sale to persons under the legal age of 21;
- Alcohol is not served from common or self-serve containers;
- Service complies with this Policy, as well as the rules of the facility;
- Designated non-drinking hosts are assigned to attend the event;
- Assistance is provided to any attendee who is intoxicated and needs alternative transportation home.
- Using a professional caterer or holding the event at a site provided by a vendor who is licensed to sell and serve alcohol consumed at the event are the only methods of serving alcoholic beverages.

ix. All students must notify their Program Manager(s) within five (5) days of any arrest, charge or conviction for a violation of federal and state drug or alcohol laws.

x. If a student is convicted for a violation of federal and state drug or alcohol laws after submitting the Free Application for Federal Student Aid (FAFSA), he/she must notify the Financial Aid Office within five (5) days of the conviction.

c) **Description of applicable legal sanctions** under local, State, or Federal law for the unlawful possession or distribution of illicit drugs and alcohol:

i. A full description of federal sanctions for drug felonies can be found at the Drug Enforcement Administration (DEA) webpage: https://www.dea.gov/druginfo/ftp3.shtml

ii. A full description of penalties for North Carolina drug violations can be found at the North Carolina Controlled Substances Act, General Statute (G.S.) 90-95: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/ByArticle/Chapter_90/Article_5.html

iii. The penalties for violations of alcoholic beverage regulations are found in Chapter 18B of the North Carolina General Statutes: http://www.ncleg.net/gascripts/Statutes/StatutesTOC.pl?Chapter=0018B Such penalties include imprisonment and heavy fines.

iv. Federal financial aid considerations: In accordance with 34 CFR 668.40 https://www.law.cornell.edu/cfr/text/34/668.40, a student who has been convicted of any offense under any Federal or State law involving the possession or sale of a controlled substance shall not be eligible to receive any grant, loan, or work assistance under Title IV federal student aid programs beginning on the date of such conviction and ending after
the interval specified in the following table:

(a) If convicted of the possession of a controlled substance:

<table>
<thead>
<tr>
<th>Offense</th>
<th>Ineligibility Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Offense</td>
<td>1 year</td>
</tr>
<tr>
<td>Second Offense</td>
<td>2 years</td>
</tr>
<tr>
<td>Third Offense</td>
<td>Indefinite</td>
</tr>
</tbody>
</table>

(b) If convicted of the sale of a controlled substance:

<table>
<thead>
<tr>
<th>Offense</th>
<th>Ineligibility Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Offense</td>
<td>2 Years</td>
</tr>
<tr>
<td>Second Offense</td>
<td>Indefinite</td>
</tr>
</tbody>
</table>

(c) In the event a student is convicted of both possessing and selling illegal drugs, and the periods of ineligibility are different, the student will be ineligible for the longer period.

(d) A student whose eligibility has been suspended may resume eligibility before the end of the ineligibility period determined if:

- The conviction is reversed, set aside, or otherwise rendered invalid or
- The student satisfactorily completes an approved drug or alcohol rehabilitation program that includes passing two unannounced drug screening tests administered by an approved drug rehabilitation program. The drug rehabilitation program referenced in this section is one that is administered or recognized by a Federally or State-licensed hospital, health clinic, or medical doctor.

(e) If a student is convicted of possessing or selling drugs after submitting the Free Application for Federal Student Aid (FAFSA), the student must notify the Financial Aid Office within five (5) days of the conviction.

(d) **Sanctions imposed by the School:** The School will impose disciplinary sanctions, up to and including dismissal and referral for prosecution, on a student for violations of the standards of conduct required by paragraph 3a) of this policy as follows:

i. Any student who violates federal/North Carolina/local laws may be subject both to criminal prosecution and to disciplinary proceedings by the School.

ii. The penalties imposed by the School for students found to have violated applicable law or School policy will vary depending upon the nature and seriousness of the offense and may include a range of disciplinary actions from reprimand, probation, restriction, suspension, and dismissal.

iii. For the illegal manufacture, sale or delivery, or possession with the intent to manufacture, sell or deliver, of any controlled substance identified in Article 5, North Carolina Controlled Substances Act, a student may be dismissed. All trafficking activities of any controlled substances have the presumptive sanction of expulsion.

iv. Illegal Possession of Drugs:
For a first offense involving the illegal possession of any controlled substance identified in Schedules I-V, Article 5, North Carolina Controlled Substances Act, the minimum penalty is suspension.

For a first offense involving the illegal possession of any controlled substance identified in Schedule VI, Article 5, North Carolina Controlled Substances Act, the minimum penalty is a combination of educational, therapeutic, and punitive sanctions.

For second or other subsequent offenses involving the illegal possession of controlled substances, progressively more severe penalties will be imposed, up to and including dismissal.

The applicable program manager (or designee) may place a student on an interim suspension before completion of regular conduct proceedings, when the student’s continued presence within the School community would constitute a clear and immediate danger to the health or welfare of other members of the University community. The staff of the department of WFSM Counseling and Wellness Services would only be involved in this process if a student was found to be a threat to self or others during the student’s evaluation by WFSM Counseling and Wellness Services.

When it is clear that the student has engaged in or threatens to engage in behavior that poses a significant risk of harm to the safety or security of themselves, others, or to property, or directly or substantially impedes the activities of members of the institution’s community, including employees, other students, patients, or visitors.

In accordance with the applicable program’s dismissal policy and/or standards of conduct

If such a suspension is imposed, an appropriate hearing of the charges against the suspended person will be held as promptly as possible. Students in the Wake Forest School of Medicine may appeal the dismissal decision in accordance with the applicable program’s appeal policy; students in the Graduate School of Arts and Sciences, Biomedical Programs, may appeal the dismissal in accordance with the procedures established by the program.

If indicated, the School may offer the student the option of evaluation, counseling, and successful completion of an appropriate rehabilitation program as a condition of remaining in the program. Any student, if given the option to participate in a rehabilitation program, will comply with the treatment and rehabilitation requirements set forth below or withdraw from the School. Any such individual electing treatment and rehabilitation will:

Satisfactorily participate in a substance use disorder or rehabilitation program approved for such purpose by a federal, state, or local health, law enforcement or other appropriate agency at the individual’s expense.

Provide evidence satisfactory to the School’s program manager of continued outpatient therapy in an approved program appropriate to the treatment recommendation of the student’s substance use disorder or rehabilitation program.

Remain substance free after completing a rehabilitation program for chemical dependency, and participate in random “for cause” drug testing during rehabilitation and for the duration of the student’s enrollment in the School.
Failure to comply with these requirements will result in dismissal.

vii. Failure of any alcohol and/or drug test will result in disciplinary actions, up to and including dismissal. Remaining in the program will be conditional upon successful completion of the rehabilitation program as described in Section 3d) vi.

viii. For Cause Drug Screening and/or breath alcohol testing: Students will be required to undergo “for cause” drug screening and/or breath alcohol testing for the following reasons:

(a) Reporting to School under the influence of alcohol or drugs, including legally obtained prescription drugs, which impair one’s ability to perform normal work activities or in a condition giving the program manager, based on the agreement of two other faculty or staff members, reasonable cause to suspect the influence of alcohol or other drugs due to the following:

• Observable abnormal or unusual behavior
• Injury or accident for which medical attention is needed beyond simple first aid
• Acts for which a student is responsible that involve injury to a staff/faculty member, patient, visitor, or student requiring medical attention beyond simple first aid
• Gross negligence and carelessness
• Disregard for safety, life, or well-being of any WFBH staff/faculty member, patient, visitor, or student
• Upon suspicion of drug diversion

(b) Failing a urine drug screening;

(c) Violating School or WFBH policy; or

(d) After successfully completing a rehabilitation program for chemical dependency for the duration of the student’s enrollment in the School

ix. If the urine drug test is determined to be positive following a medical review for legal prescriptions or other documented medical reasons, the student may elect to have his/her specimen retested at his/her expense. The same sample will be sent to another diagnostic lab for testing. A student who elects to re-test the sample will contact WFBH Employee Health to request and arrange payment for this service.

x. For federal financial aid considerations: See section 3c) of this policy

e) Description of the health risks associated with the use of illegal drugs and the abuse of alcohol – For current information regarding the health risks associated with the use of illegal drugs and abuse of alcohol, see US DEA Drugs of Abuse

f) Description of any drug or alcohol counseling, treatment, or rehabilitation or re-entry programs that are available to students

i. Any student experiencing an emergency should call 911 immediately.

ii. WFSM Campus: Early recognition of substance use disorder is important for successful rehabilitation. The School endorses and encourages the activities of the WFSM Counseling and Wellness Services in early identification, treatment, and rehabilitation of students with a substance abuse problem. This is a therapy center rather than a 24/7 crisis center. The WFSM Counseling and Wellness Services center provides individual, group, and couples counseling, consultation,
coaching, and wellness outreach in order to support and promote the emotional, intellectual, physical, social and spiritual wellness of students in the Wake Forest School of Medicine. To schedule an appointment, students can email: counseloringservices@wakehealth.edu

iii. **WFU Reynolda Campus:** Students also have access to the Office of Wellbeing (BASICS@wfu.edu, 336-758-4371): The Office of Wellbeing coordinates campus-wide alcohol and other drug education and prevention programs as well as the Brief Alcohol Screening and Intervention for College Students (BASICS) program. BASICS provides individualized screening and intervention for students facing challenges with their alcohol and or drug use. The Office of Wellbeing can also refer students in need of additional assessment or services to the appropriate level of care.

iv. Students who do not wish to take advantage of the WFSM or WFU Reynolda Campus services may wish to seek referrals to rehabilitation and treatment programs from their own health care provider.

v. Approved alcohol and drug information/treatment referral services are also available at: [https://niaaa.nih.gov/alcohol-health/support-treatment](https://niaaa.nih.gov/alcohol-health/support-treatment)

vi. Students who have disabilities and need accommodations should contact the Section 504 Coordinator, Tanya Jachmiak, at tjachmi@wakehealth.edu or 336-758-7258, or submit the form "Request for Consideration" form available at the WFU Disability Services for Students/Learning Assistance Center: [http://lac.wfu.edu/disability-services/](http://lac.wfu.edu/disability-services/)

g) The School (in compliance with FERPA and any other applicable privacy laws and regulations) will participate in the biennial review of its drug prevention program to:

i. Determine its effectiveness and implement changes to the program if they are needed; and

ii. Ensure that the disciplinary sanctions described in paragraph 3 d) of this policy are consistently enforced
**WFBMC Drug Diversion – Prevention, Detection and Response Policy**

It is the policy of Wake Forest Baptist Health that the Drug Diversion Prevention, Detection and Response program provides a systematic, coordinated and continuous approach to the prevention, recognition and reporting of drug diversion to ensure safe medication practices, safe employee behavior and to prevent patient harm.

Full Policy – [Drug Diversion – Prevention, Detection and Response Policy](#)
Student Health Insurance Requirements and Responsibilities

1. General Policy Statement:

   It is the policy of the Wake Forest University School of Medicine to require all students to maintain medical insurance during their enrollment in the School of Medicine.

   a) Responsible Department/Party/Parties:

      i. Policy Owner: Vice President & Associate Dean for Healthcare Education Administration
         ii. Procedure: Vice President & Associate Dean for Healthcare Education Administration
         iii. Implementation: Vice President & Associate Dean for Healthcare Education Administration

2. Definitions: For purposes of this Policy, the following terms and definitions apply:

   a) WFSM: Wake Forest School of Medicine
   b) Student: A person who matriculates into, is enrolled in or is taking courses in the Academic Nursing, the Physician Assistant (PA), and the Undergraduate Medical Education (MD) degree programs of Wake Forest School of Medicine, and students of the Wake Forest University Graduate School of Arts and Sciences, Biomedical Sciences degree programs.
   c) Program Manager of applicable educational program as follows:

      Academic Nursing Program: Program Director
      Graduate School of Arts & Sciences, Biomedical Sciences Programs: Dean, Graduate School of Arts & Sciences, Biomedical Sciences
      Physician Assistant (PA) Program: Program Director
      Undergraduate Medical Education (MD) Program: Program Director
3. Policy Guidelines:

a) Wake Forest University School of Medicine requires that all Students maintain medical insurance during enrollment in a degree seeking program of study.
   i. WFSM offers a Student plan to all Students.
   
   ii. Students are automatically enrolled in the Student plan one time each year. Students who do not want to participate in the Student plan and who provide proof of adequate alternative medical insurance coverage are required to waive out of the Student plan by the deadline specified by WFSM. Students who fail to waive out of the Student plan will be responsible for all premium costs. No exceptions will be allowed for failing to submit a waiver.

   iii. Students may be eligible to opt in or out of the plan due to certain qualifying life events, such as ageing out of parent’s insurance, gaining coverage through marriage, etc.
        a. A complete list of qualifying events is available from the Student Health Navigator.

   iv. The per semester cost of the premium for enrollment in the Student plan is billed to the Student each semester on the Student’s account.
        a. Students receiving a monthly stipend will be allowed to have the Student plan cost debited monthly. Students who receive an institutional contribution towards the cost of the Student plan will see a credit on their student account in the appropriate amount.

b) Optional dependent, dental and vision insurance is offered to all Students.
   i. Students who are interested in obtaining coverage under one or more of these plans must enroll through a separate enrollment process. Students are not automatically enrolled in optional plans.
Medical Health Requirements and Immunizations Policy

PURPOSE

It is the policy of Wake Forest Baptist Health (WFBH) to adhere to state and federal guidelines to protect all personnel, patients, and visitors from communicable disease infection and exposure. This policy outlines the applicable health matriculation requirements for Students as provided in the WFBH Communicable Diseases, Employee Health and Infectious Disease Prevention policies and as required by North Carolina Immunization Administration Code 10A NCAC 41A .0401 Dosage and Age Requirements for Immunization, effective January 9, 2018.

SCOPE

All Students of the Wake Forest School of Medicine and the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences educational programs are responsible for complying with this policy. Unclassified students and Distance Education program students will adhere to the WFBH contingent workforce requirements for on-boarding and are not included in the scope and requirements of this policy with the following exception:

Upon registration for a semester with an on-campus course load of more than four (4) day-time credit hours, an Unclassified Student or Distance Education Program Student must provide documentation of immunizations required by North Carolina to Employee Health.

DEFINITIONS

Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

School: Jointly refers to all degree-granting programs of the Wake Forest School of Medicine, including the Academic Nursing Department, the Physician Assistant (PA) Program, the Undergraduate Medical Education (MD) Program, and the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences.

Student: Degree-seeking Student who matriculates into an on-campus curricular program of the School.

Unclassified Student: A non-degree-seeking student.

Distance Education program: A formal educational process in which the majority of the instruction (interaction between students and instructors and among students) in a course occurs when students and instructors are not in the same place. Instruction may be synchronous or asynchronous. A distance education course may use the internet; one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices; audio conferencing; or video cassettes, DVD’s, and CD-ROMs if used as part of the distance learning course or program.

Program Manager of applicable program as follows:

<table>
<thead>
<tr>
<th>Program Manager</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Nursing Department:</td>
<td>Department Chair</td>
</tr>
<tr>
<td>Graduate School of Arts &amp; Sciences-Biomedical Sciences Programs:</td>
<td>Dean, Graduate School of Arts &amp; Sciences- Biomedical Sciences Programs</td>
</tr>
<tr>
<td>Physician Assistant (PA) Program:</td>
<td>Program Director</td>
</tr>
<tr>
<td>Undergraduate Medical Education (MD) Program:</td>
<td>Senior Associate Dean for MD Program</td>
</tr>
<tr>
<td></td>
<td>Academic Affairs</td>
</tr>
</tbody>
</table>
Medical Professional: For the purposes of this policy, a healthcare provider who holds one of the following medical degrees: Doctor of Medicine (MD); Doctor of Osteopathic Medicine (DO); Physician Assistant (PA); Nurse Practitioner (NP).

Matriculation: The first day students arrive on campus for orientation.

Policy Guidelines

A. Requirements

a. All Students must submit documentation of the following by deadlines established by applicable program prior to matriculation:

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Submit documentation of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Respiratory (N95) Fit Testing form</strong></td>
<td>For Students in clinical programs: Complete only the applicable sections of the form per instructions provided. Respiratory (N95) Fit testing will be performed during matriculation.</td>
</tr>
<tr>
<td><strong>Tuberculosis (TB) Baseline TB Testing</strong></td>
<td>One of the following is required:</td>
</tr>
<tr>
<td></td>
<td>• QuantiFERON-TB Gold or T-SPOT.TB blood test (IGRA tests; lab report required) <em>(the most recent test will be dated no earlier than 1 year prior to matriculation date)</em></td>
</tr>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>• 2 consecutive annual tests <em>(the most recent test will be dated no earlier than 1 year prior to matriculation date)</em></td>
</tr>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>• 2-step TB skin test (Administered 1-3 weeks apart) <em>(the most recent test will be dated no earlier than 1 year prior to matriculation date)</em></td>
</tr>
<tr>
<td></td>
<td><strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>• If history of positive results, submit the following:</td>
</tr>
<tr>
<td></td>
<td>o A chest x-ray stating no active TB (x-ray report required) <strong>AND</strong></td>
</tr>
<tr>
<td></td>
<td>o Proof of past positive testing (plus any treatment, if implemented) <strong>AND</strong></td>
</tr>
<tr>
<td></td>
<td>o A Symptom-Free TB questionnaire <em>(the most recent would be dated no earlier than 1 year prior to matriculation date)</em></td>
</tr>
<tr>
<td><strong>Measles, Mumps &amp; Rubella (MMR)</strong></td>
<td>One of the following is required:</td>
</tr>
<tr>
<td></td>
<td>• 2 vaccinations of MMR at least 28 days apart. The first dose must be on or after the first birthday. <strong>OR</strong> The following combination:</td>
</tr>
<tr>
<td></td>
<td>• 2 doses of Measles vaccine (at least 28 days apart). The first dose must be on or after the first birthday. <strong>AND</strong></td>
</tr>
<tr>
<td></td>
<td>• 2 doses of Mumps vaccine (at least 28 days apart) the first dose must be on or after the first birthday. <strong>AND</strong></td>
</tr>
<tr>
<td></td>
<td>• 1 dose of Rubella on or after the first birthday. <strong>OR</strong></td>
</tr>
<tr>
<td></td>
<td>• Positive antibody titer (lab report or physician verification of results required)</td>
</tr>
</tbody>
</table>

NOTE:
| **Tetanus/diphtheria toxoid**<br>(**DT/DTaP/DTP/Td**) | The following are required:<br>• All students must submit documentation of 3 doses* of a tetanus/diphtheria toxoid containing and one must be a Tdap. Tdap vaccination within the past 10 years prior to the matriculation date. If Tdap is more than 10 years old, a Td (Tetanus/Diphtheria Toxoid) within the past 10 years is acceptable.<br>* (Individuals entering college or university for the first time before July 1, 2008 need only provide proof of Tdap vaccination within the past 10 years prior to the matriculation date. If Tdap is more than 10 years old, a Td (Tetanus/Diphtheria Toxoid) within 10 years is acceptable.) |
| **Hepatitis B** | Both of the following are required:<br>A completed full series of an approved Hepatitis B vaccine (3 doses of Energix-B or Recombivax-B or 2 doses of HepB-CpG/Heplisav-B)<br>AND<br>• A quantitative Hepatitis B Surface antibody titer of >/ 10 mIU/ml (lab report or physician verification of results required)<br><br>**NOTE:**<br>• If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series.<br>• If your titer was < 10 mIU/ml, new alerts will be created for you to receive 1 additional booster dose with a repeat antibody titer 1-2 months later. If the repeat titer is < 10 mIU/ml you will be required to complete the remainder of the series and obtain a final titer 1-2 months after completion of the vaccine series. If this is the case, additional doses of the vaccine of the series will be allowed to be completed after matriculation. |
| **Varicella (Chicken Pox)** | One of the following is required:<br>• 2 vaccinations (on or after the first birthday and at least 28 days apart)<br>OR<br>• Positive antibody titer (lab report or physician verification of results required)<br><br>**NOTE:**<br>• If your series is in process, submit where you are in the series, and new alerts will be created for you to complete the series.<br>• If your titer was negative or equivocal, submit your negative or equivocal titer<br>• Documentation of having had varicella (chicken pox) is NOT sufficient. |
| **Influenza Immunization** | For matriculation, influenza immunization is required ONLY for Students who matriculate during the influenza season. The influenza season is generally noted as October 1 – March 31, or as determined by the WFBH Influenza Immunization Task Force. |
| **COVID-19 Immunization Requirement** | Completion of the full primary series of an FDA approved or authorized COVID-19 vaccine dosed per CDC/ACIP guidelines is required prior to matriculation. |

b. The following will be required during the Student’s enrollment at the School upon renewal notifications. WFBH Employee Health will monitor continuing/renewal requirements to ensure compliance.
### CONTINUING/RENEWAL REQUIREMENTS

<table>
<thead>
<tr>
<th><strong>Respiratory (N95) Fit Testing</strong></th>
<th>Required annually for Students in clinical settings.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tetanus</strong></td>
<td>Updated tetanus is required at 10-year intervals.</td>
</tr>
<tr>
<td><strong>Tuberculosis (TB) Testing</strong></td>
<td>One of the following is required annually for Students in clinical settings, with face-to-face patient contact and/or non-human primate contact, if Employee Health determines the prevalence of TB meets OSHA requirements for universal TB testing:</td>
</tr>
<tr>
<td></td>
<td>• TB test OR</td>
</tr>
<tr>
<td></td>
<td>• QuantiFERON Gold, IGRA, or T-Spot blood test OR</td>
</tr>
<tr>
<td></td>
<td>• If history of <strong>positive</strong> results, submit a completed TB questionnaire</td>
</tr>
</tbody>
</table>

**NOTE:**

- A NEW positive result would require a clear chest x-ray stating no active TB

| **Influenza Immunization (Seasonal)** | • Required annually, in accordance with the *WFBMC Infectious Diseases Prevention Policy* |
|                                       | • Influenza season is generally noted as October 1 – March 31, or as determined by the WFBMC Influenza Immunization Task Force |

**c.** Other additional immunizations and health requirements are dependent upon a Student’s travel for field studies, clinical rotation sites, lab assignment, type of animal species and/or the type of agents used during research.

**B. Financial Responsibility**

**a.** Students are responsible for all costs to **meet matriculation and continuing/renewal requirements unless otherwise noted below**, including those services received at WFBH Employee Health.

**i.** Students are responsible for:

1. Charges for for-cause drug screening and alcohol testing beyond the initial test and one retest.
2. Charges for services related to non-required electives.

**ii.** The School is responsible for:

1. Charges for the following continuing/renewal requirements: annual Influenza immunization, annual Respiratory (N95) Fit testing, annual TB testing.
2. Charges for an initial drug screening and alcohol testing and one for cause retest.
3. Any screenings required by the curriculum including requirements for field studies, lab assignment, type of animal species and/or the type of agents used during research.
iii. Services obtained outside of Employee Health will be paid by the School up to the amount charged by Employee Health.

C. Exemptions

   a. In accordance with the WFBH Communicable Diseases, Employee Health and Infectious Disease Prevention policies, immunity to the communicable diseases listed on pages 2-4 of this policy is required for all Students. In certain circumstances, a medical or religious exemption for a required immunization may be granted. Requests for exemption must be approved by the Employee Health Medical Director or designee.

D. Violation of this policy will result in suspension of access to the medical center, associated buildings, research and training spaces, and network access as determined by the appropriate Program Manager.

E. In accordance with the WFBH Communicable Diseases, Employee Health and Infectious Disease Prevention policies, Students will not be cleared for coursework until all requirements have been addressed with Employee Health.

F. The annual College Immunization Report is submitted through the Office of the Registrar of Wake Forest University to the NC Department of Health and Human Services. This report includes a summary of compliance by the matriculants of the School, as prepared by WFBH Employee Health.

G. For the safety of our patients, Students and workforce, institutional and/or site restrictions may apply to Students who are not considered immune per policy. Students will not be approved for training until all requirements have been addressed with Employee Health.

REFERENCES

Related Policies:
   WFBH Infectious Disease Prevention Policy
   WFBH Communicable Diseases, Employee Health
   WFBH Tuberculosis Control Plan
   Student Substance Abuse Policy

Governing Law or Regulations

   Centers for Disease Control and Prevention: “Immunization of Health-Care Personnel: Recommendations of the Advisory Committee on Immunization Practices (ACIP)” MMRW 2011; 60 (RR-7) 1-45
   https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6007a1.htm

   N.C.G.S. § 130A-155.1
   North Carolina Immunization Administration Code

   10A NCAC 41A.0401 “Dosage and Age Requirements for Immunization,” effective July 1, 2015

   North Carolina Immunization Branch – Colleges and Universities:
   http://www.immunize.nc.gov/schools/collegesuniversities.htm

   Hepatitis B and Health Care Personnel- Immunize.org
   Immunize.org Hepatitis B Summary

ATTACHMENTS

N/A

REVISION DATES
9/2015; 5/2020; 8/2021

Addendum

As outlined by the Wake Forest School of Medicine Medical Health Requirements and Student Immunizations Policy set forth in the Student Handbook, each student matriculating into an on-campus curricular program of the school must meet certain health requirements prior to matriculation. As noted in the Policy, distance education program students are not included in the scope of the Policy and adhere to the WFBH Contingent Workforce requirements. More information about Contingent Workforce requirements can be found here.

When curriculum is delivered in a distance education format, incoming students, including those matriculating into on-campus curricular programs of the Wake Forest School of Medicine and the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences, may comply with the same requirements as distance education students until the onset of on-campus instruction.

Each student matriculating into an on-campus curricular program of the school will still be expected to have met all matriculation requirements, as set forth in the Medical Health Requirements and Student Immunizations Policy, by the start of in-person instruction. Students should consult their specific Program Director if they are unable to meet the requirements upon the beginning of in-person instruction. As stated in the Policy, failure to submit sufficient documentation of these requirements will prevent matriculation.
Influenza Immunization Policy

PURPOSE

The purpose of this policy is to protect patients, employees, students, trainees, volunteers, and the community from influenza infection through annual immunization of all WFBH employees, students, trainees, and volunteers.

SCOPE

This policy applies to All WFBH employees, students, trainees, volunteers, and other “persons of interest” who are granted badge access to WFBH facilities.

DEFINITIONS

A. **Policy**: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. **WFBH**: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

C. **Employees** include faculty, regular full-time, part-time, and PRN employees, House Officers, and contract employees.

D. **Students** include medical students, physician assistant students, graduate students within WFBH, students of the Doctor of Nursing Practice Program and students of the Nurse Anesthesia Program, student interns and administrative residents.

E. **Trainees** include post-doctoral program trainees (postdocs).

F. **Volunteers** include all persons performing volunteer work in WFBH, including all volunteers in the Volunteer Services Department.

G. **Other Persons of Interest** include all other persons who are granted WFBH badges to access facilities. This includes independent consultants and employees of vendors.

POLICY GUIDELINES

A. **Annual Influenza Immunization**: All persons covered by this policy must be immunized against influenza each year. The annual influenza immunization program is coordinated by Employee Health Services.

1. Dates for the annual influenza immunization program and timelines for compliance with the provisions of this policy will be established and communicated each year by the Director of Employee Health Services, in consultation with the Medical Director of Infection Prevention.

2. Influenza vaccines are provided free of charge to all WFBH employees, students, and volunteers. All other persons covered by this policy may receive an influenza vaccine from Employee Health Services for a fee or provide proof of influenza immunization from an outside source.

3. Covered persons who are vaccinated through services other than Employee Health Services, such as a private physician office or public clinic, must provide proof of immunization. Acceptable forms of proof are a provider practice/physician’s note or immunization record identifying the type of vaccine.
administered, date of vaccine and anatomical location.

B. Medical Exemptions

1. Exemption to immunization may be granted for medical contraindications.
   a. Individuals requesting exemption due to medical contraindications must provide proof of medical contraindications, including a letter from their private physician, before the end of the exemption request deadline (typically one week before the employee campaign ends).

   b. Requests for exemption due to medical contraindications will be evaluated by the Director of Employee Health Services or designee, applying criteria based upon CDC recommendations.

   c. Responses to requests for medical exemption will be provided in writing. Persons requesting exemption are considered compliant with policy during the time requests are under review.

2. If exemption is granted for a temporary health condition, a new request for exemption must be made each year to which the condition applies.

3. If exemption is granted for a permanent condition, such as allergy or history of Guillain- Barre syndrome (GBS), the exemption does not need to be requested each year unless vaccine technology would change to eliminate issues regarding allergies.

C. Religious Exemptions

1. Exemption to immunization may be granted based on an individual’s religious beliefs. For purposes of this policy, "religious beliefs" include those that are theistic in nature, as well as non-theistic moral or ethical beliefs as to what is right and wrong that are sincerely held with the strength of traditional religious views. Personal preferences do not constitute religious beliefs.

2. Individuals requesting exemption due to religious beliefs must submit an exemption request before the end of the exemption request deadline (typically one week before employee campaign ends). The written request must clearly explain why influenza immunization is contrary to the individual's religious beliefs.

3. Requests for exemption due to religious beliefs will be evaluated by the Director of Employee Health Services or designee, in consultation with Human Resources, applying standards established in Title VII of the Civil Rights Act of 1964 relating to religious accommodations in the workplace. Additional information may be requested if necessary to adequately evaluate a request for religious exemption.

4. Responses to requests for religious exemption will be provided in writing. Persons requesting exemption are considered compliant with policy during the time requests are under review.

D. Employee Health Services will maintain records of all influenza immunizations.

E. In the event of an influenza vaccine shortage, relative to the population of WFBH employees, students, trainees, and volunteers, Employee Health Services, in consultation with the Medical Director of Infection Prevention, will establish criteria for administration of available vaccine. Generally, priority will be given to employees who provide direct hands-on patient care and/or have high risk of exposure to patients with influenza. Employee Health Services is responsible to communicate when the vaccine is available and to whom.

F. All provisions of this policy may also be applied to immunizations for non-seasonal influenza for which protection is not provided by the annual influenza vaccine, where it is determined that vaccinating employees, students, trainees and volunteers is necessary to protect patients, employees, students, trainees, volunteers and the community from infection. Application of this policy other than to annual influenza immunization will be determined by WFBH Administration, in consultation with the Director of Employee Health Services and the Medical Director of Infection Prevention.

G. Employees or volunteers who fail to comply with the requirements of this policy may become ineligible to
work at WFBH. Employees will be subject to Corrective Action up to and including the end of employment.

H. Trainees, student interns or administrative residents who fail to comply with the requirements of this policy will become ineligible to continue in their respective training programs at WFBH.

I. Medical students, physician assistant students, graduate students within WFBH, or students of the Nurse Anesthesia Program who fail to comply with the requirements of this policy will be subject to disciplinary action.

J. Other covered persons of interest who fail to comply with the requirements of this policy will have their badge access to WFBH facilities discontinued.

REFERENCES
TJC Hospital Standards IC.02.04.01
CMS Conditions of Participation
CDC Guidelines

ATTACHMENTS
None

REVISION DATES
09/2009, 09/2011, 04/2014, 04/2017, 02/15/2021
Effects of Infectious Disease or Disability on Student Learning Activities Policy

PURPOSE

This policy describes the approach the Wake Forest School of Medicine and the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences will follow to address the effects of infectious and environmental disease or disability on Student learning activities.

SCOPE

This policy applies to all students.

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), HighPoint Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

C. Student: A person who matriculates into, is enrolled in, or is taking courses in the Academic Nursing, the Physician Assistant (PA), or the Undergraduate Medical Education (MD) programs of Wake Forest School of Medicine or the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences programs (hereinafter jointly referred to as “School”).

D. Health Care Provider: For purposes of this policy, defined as a Student.

E. Program Manager: Defined for each educational program as follows:
   a. Academic Nursing Program: Program Director
   b. Graduate School of Arts and Sciences, Biomedical Sciences Programs: Dean, Graduate School of Arts and Sciences-Biomedical Sciences
   c. Physician Assistant (PA) Program: Program Director
   d. Undergraduate Medical Education (MD) Program: Associate Dean for MD Program Academic Affairs

POLICY GUIDELINES

A. The School abides by the Wake Forest Baptist Medical Center policies on Human Immunodeficiency Virus Infection in Patients or Employees, Non-Bloodborne Communicable Diseases Exposure Plan, Emerging Communicable Diseases Policy, Reporting Communicable Diseases, and Communicable Diseases, Employee Health Services.

B. The School shall maintain the confidentiality of information regarding communicable and infectious diseases (e.g. COVID-19, HIV testing, HIV status, or AIDS-related conditions) of its Students in accordance with all applicable federal, state and local laws and regulations and in accordance with all policies and procedures of Wake Forest Baptist Medical Center.

C. For specific processes related to students infected with bloodborne pathogens, please refer to Effect of Infectious Disease or Disability on Student Learning Activities Procedures.
REFERENCES

Related Policies

Effect of Infectious Disease or Disability on Student Learning Activities Procedures
Human Immunodeficiency Virus Infection in Patients or Employees
Communicable Diseases, Employee Health Services Non-bloodborne Communicable Diseases Exposure Plan
Emerging Communicable Diseases
Reporting Communicable Diseases

MD Program: Exposure to Infectious and Environmental Hazards Policy - MD Program - WFSM
Academic Nursing Program: Technical Standards for Admission, Continuation and Graduation
MD Program: Technical Standards for Medical School Admission, Continuation and Graduation - MD Program - WFSM
PA Program: Technical Standards - PA Program - WFSM
Student Disability Accommodations Requests Policy and Procedures

Related Standards

ARC-PA Standard A3.08 LCME
Standard 12.8

Governing Law or Regulations

Rules regarding HIV-infected and Hepatitis B infected health care workers: 10A NCAC41a .0207
Quarantine and Isolation Authority of the State Health Director or a local health director: G.S. 130A-145
Infection prevention – Healthcare settings: 10A NCAC 41A .0206(b)
Section 504 of the Rehabilitation Act and the Americans with Disabilities Act References

SHEA guideline for management of healthcare workers who are infected with Hepatitis B virus, Hepatitis C virus, and/or human immunodeficiency virus. Infect Control Hosp Epidemiol. 2010 Mar;31(3):203-32. PMID: 20088696 (reference)

REVISION DATES

8/2019; 11/2020
Policy on Student Records

The Family Educational Rights and Privacy Act (FERPA) affords eligible students certain rights with respect to their education records. An "eligible student" under FERPA is a student who is 18 years of age or older or who attends a postsecondary institution, and an “education record” consists of those records directly related to a student and maintained by the education institution. Rights afforded to eligible students include:

- The right to inspect and review the student's education records within 45 days after the day the School receives a request for access. A student should submit a written request identifying the record(s) the student wishes to inspect to the registrar or other appropriate official of the program in which the student is enrolled. The registrar or program official will arrange for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the registrar or program official to whom the request was submitted, that individual will advise the student of the correct official to whom the request should be addressed.

- The right to request the amendment of the student's education records that the student believes is inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA.

A student who wishes to request an amendment to a record should submit a written request to the program official responsible for the record, clearly identifying the part of the record that should be changed and why.

In accordance with the “Operational Guidelines Regarding the Student Record (FERPA),” if the program decides not to amend the record as requested, the program will notify the student in writing of the decision and the student's right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

- The right to provide written consent before the School discloses personally identifiable information from the student's education records, except to the extent that FERPA authorizes disclosure without consent.

For example, the School discloses education records without a student's prior written consent under the FERPA exception for disclosure to School officials with legitimate educational interests. A School official is a person employed by or on behalf of Wake Forest University Health Sciences or Wake Forest Baptist Health (WFBMC) in an administrative, supervisory, academic, research, or support staff position (including law enforcement unit personnel and health staff); a person serving on the board of trustees; or a student serving on an official committee, such as a disciplinary or grievance committee. A School official also may include a contractor outside of the School or the WFBMC who performs an institutional service or function for which the School would otherwise use its own employees and who is under the direct control of the School with respect to the use and maintenance of personally identifiable information from education records. A School official has a legitimate educational interest if the official needs to review an education record in order to fulfill their professional responsibilities for the School.

Upon request, the School also discloses education records without consent to officials of another School in which a student seeks or intends to enroll.

- The right to file a complaint with the U.S. Department of Education concerning alleged failures by the School to comply with the requirements of FERPA. The name and address of the office that administers FERPA is:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202
Students should be aware that at matriculation, certain admissions records may be transferred to the registrar in the office of student records for each program.

In addition, the following information concerning students is considered by the School to be directory information and may be disclosed without a student's consent, unless the student indicates in writing and submitted to the Registrar that any or all of the items are not to be released: name, address, telephone number, electronic mail address, date and place of birth, major field of study, enrollment status, dates of attendance, degrees and/or awards received at the School, participation in officially recognized activities, the most recent previous educational agency or institution attended by the student, and other similar information, such as a photograph.

Records unavailable to students are:

- Confidential letters of recommendation which were placed in the student's educational record prior to January 1, 1975, if such letters or statements are not used for purposes other than those for which they are specifically intended;
- Confidential recommendations executed on or after January 1, 1975, for which the student may have chosen to waive their access rights;

There are also certain exceptions to the definition of an education record. These exceptions include:

- Records of institutional, supervisory, and administrative personnel and educational personnel ancillary thereto which are in the sole possession of the maker thereof, and which are not accessible or revealed to any other person except a substitute; and
- Law enforcement records which are unavailable to persons other than law enforcement officials of the same jurisdiction.
- Records of the institution which contain only information relating to a person after that person is no longer a student at the institution. For example, information gathered and maintained on the accomplishments of alumni.
- Employment records which are maintained in Human Resources for staff and former staff as required by Medical Center policies and government record-keeping regulations. This applies to both electronic and paper employment records.
- Treatment records which include medical records held by health plans and health care providers

https://www.hhs.gov/hipaa/index.html

**Records Maintained by the School:**

<table>
<thead>
<tr>
<th>Record Type</th>
<th>Location</th>
<th>Custodian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Aid Records – All programs</td>
<td>Office of Financial Aid– 1st floor Bowman Gray Center for Medical Education</td>
<td>Financial Aid Officer</td>
</tr>
<tr>
<td>Student records relating to the learning environment, professionalism, or mistreatment – All programs</td>
<td>Office of Student Affairs 2nd floor Bowman Gray Center for Medical Education</td>
<td>Learning Environment Liaison (Formerly Student Advocate)</td>
</tr>
<tr>
<td>Disability information disclosed by a Student seeking accommodations – All Programs</td>
<td>Learning Assistance Center &amp; Disability Services Wake Forest University 118 Reynolda Hall</td>
<td>Director of the Learning Assistance Center &amp; Disability Services</td>
</tr>
</tbody>
</table>

**Undergraduate Medical Education (MD) Program**
<table>
<thead>
<tr>
<th>Record Type</th>
<th>Location</th>
<th>Custodian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions Records</td>
<td>5th floor 525@ Vine</td>
<td>Student Admissions Administrator</td>
</tr>
<tr>
<td>Student records after matriculation, transcripts, final grades, directory information, disciplinary records</td>
<td>5th floor 525@ Vine</td>
<td>Registrar</td>
</tr>
<tr>
<td>Student test scores, course grades, class rankings</td>
<td>5th floor 525@ Vine</td>
<td>Registrar</td>
</tr>
<tr>
<td>Approved disability accommodations letter(s)</td>
<td>5th floor 525@ Vine</td>
<td>Program Liaison for Disability Accommodations</td>
</tr>
</tbody>
</table>

**Physician Assistant (PA) Program:**

<table>
<thead>
<tr>
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<th>Location</th>
<th>Custodian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions Records</td>
<td>2nd floor 525@ Vine</td>
<td>Administrative Coordinator</td>
</tr>
<tr>
<td>Student records after matriculation, transcripts, final grades, directory information, disciplinary records</td>
<td>Office of Enrollment Services – 1st floor Bowman Gray Center for Medical Education</td>
<td>Registrar</td>
</tr>
<tr>
<td>Student test scores, course grades</td>
<td>Office of applicable course director</td>
<td>Course Director</td>
</tr>
<tr>
<td>Approved disability accommodations letter(s)</td>
<td>1st floor, 525@Vine</td>
<td>Manager, curriculum and Outcomes</td>
</tr>
</tbody>
</table>

**Graduate School – Biomedical Sciences Programs:**

<table>
<thead>
<tr>
<th>Record Type</th>
<th>Location</th>
<th>Custodian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions Records</td>
<td>Office of Enrollment Services – 1st floor Bowman Gray Center for Medical Education</td>
<td>Enrollment Services Coordinator</td>
</tr>
<tr>
<td>Student records after matriculation, transcripts, final grades, directory information</td>
<td>Office of Enrollment Services – 1st floor Bowman Gray Center for Medical Education</td>
<td>Registrar</td>
</tr>
<tr>
<td>Student test scores, course grades</td>
<td>Office of applicable course director</td>
<td>Course Director</td>
</tr>
<tr>
<td>Approved disability accommodations letter(s)</td>
<td>1st floor, 525@Vine</td>
<td>Manager, curriculum and Outcomes</td>
</tr>
</tbody>
</table>

**Academic Nursing Program**

<table>
<thead>
<tr>
<th>Record Type</th>
<th>Location</th>
<th>Custodian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions Records</td>
<td>2nd floor 525@Vine</td>
<td>Administrative Coordinator</td>
</tr>
<tr>
<td>Student records after matriculation, transcripts, final grades, directory information, disciplinary records</td>
<td>Office of Enrollment Services – 1st floor Bowman Gray Center for Medical Education</td>
<td>Registrar</td>
</tr>
<tr>
<td>Student test scores, course grades</td>
<td>2nd floor 525@Vine</td>
<td>Program Director</td>
</tr>
<tr>
<td>Approved disability accommodations letter(s)</td>
<td>2nd floor 525@Vine</td>
<td>Program Liaison for Disability Accommodations</td>
</tr>
</tbody>
</table>

Questions regarding FERPA should be directed to the Registrar or the Legal Department.
Student Appeal of Dismissal Policy

PURPOSE The purpose of this policy is to describe the process the Wake Forest University School of Medicine will follow to address an appeal from a Student regarding a dismissal decision.

SCOPE This policy applies to All Wake Forest University School of Medicine Students, faculty and staff are responsible for complying with this policy with the following exception. Students, faculty and staff of the Wake Forest University Graduate School of Arts and Sciences, Biomedical Sciences, should refer to the “Graduate Student Academic Grievance Procedures” found in the Wake Forest University Graduate School of Arts and Sciences Student Handbook.

Responsible Department/Party/Parties:
1. Policy Owner: Vice President & Associate Dean for Healthcare Education Administration
2. Procedure: Vice President & Associate Dean for Healthcare Education Administration
3. Implementation: Program Manager as defined below

DEFINITIONS

A. The term “Student” will apply to a person who matriculates into, is enrolled in or is taking courses in the Academic Nursing, the Physician Assistant (PA), and the Undergraduate Medical Education (MD) programs of Wake Forest University School of Medicine. This policy will not apply to students of the Wake Forest University Graduate School of Arts and Sciences, Biomedical Sciences programs.

Program Manager of applicable educational program as follows:
Academic Nursing Program: Program Director
Physician Assistant (PA) Program: Program Director
Undergraduate Medical Education (MD) Program: Senior Associate Dean for MD Program Academic Affairs

B. The Professional/Academic Dismissal: Appeals Committee (hereinafter “Appeals Committee” or “Committee”) is a standing faculty committee of the Wake Forest University School of Medicine.

C. A “business day” is defined as Monday through Friday, with the exception of the observed WFBMC holidays.

POLICY GUIDELINES

In the event of a dismissal decision by the applicable program’s policies and/or procedures:

A. A Student who wishes to appeal a dismissal decision must make a formal request for appeal in writing (which may include electronic mail) to his/her program manager or designee within seven (7) business days of notification of the dismissal.

B. During the dismissal appeal process, the Student will not actively participate in his/her program and will follow the dismissal policy and/or exit procedures of the program.

C. The Student’s written appeal must specify which of the following grounds for appeal applies and must set forth specific facts to explain why, with any supporting materials.
   1. Procedural error as set forth in policy;
   2. Sanction was inappropriate based on the circumstances; and/or
   3. Additional evidence is now available that was unavailable at the time the decision to dismiss was made.

A Student’s appeal of the dismissal decision and the decision by the Appeals Committee to uphold or reverse the dismissal decision may be made only if at least one of the grounds for appeal (above) was established to the satisfaction of the Appeals Committee.
D. Upon receipt of a Student’s written appeal of a dismissal action, the program manager or designee will:
   1. Request that the Chair of the Appeals Committee convene the Committee within 15 business days. The Chair can grant an extension for the meeting date, if necessary; and
   2. Notify the Wake Forest University School of Medicine Director of Enrollment Services.

E. Committee members who have previously evaluated the Student’s performance, made determinations on the Student’s advancement, dismissal, or graduation, or has had any other conflict of interest as specified in the Conflict of Interest Related to Student Assessment Policy must recuse themselves from participating in the review of the Student’s appeal.

F. Once the date and time of the meeting have been established, the Chair of the Appeals Committee will notify the Student and program manager (or designee) of the date, time and place of the meeting, and that the meeting will not be open to the public. Only the Student and those directly involved in the appeal may attend the meeting. The Chair will send this notice to the Student no less than ten (10) business days before the appeal is to be heard.

G. The Student may address the Committee and provide information to support the appeal. Should the Student choose not to meet with the Committee, the Student must submit a written statement and any supporting documentation to the Chair no later than the date the appeal is scheduled to be heard. While the Student may have advisors, legal counsel, and other individuals available to lend support throughout the process, only the Student who is appealing the dismissal will be permitted to meet with the Appeals Committee.

H. The Committee may seek further information, testimony, witnesses etc. at their discretion during the appeals process. Students who provide testimony at the request of the Committee will abide by their program’s code of honor and professional conduct standards policies.

I. Following review of the information provided by the Student, either in person and/or in writing, and otherwise gathered by the Appeals Committee, the Appeals Committee will deliberate and either uphold or overturn the dismissal decision based on the grounds for the appeal (see paragraph C above).

J. The decision of the Appeals Committee will be final. When a student is dismissed and the appeal is upheld, the student is not eligible to reapply for readmission to the Wake Forest University School of Medicine.

K. Notifications:
   1. The decision of the Appeals Committee will be communicated to the Student in writing.
   2. All written communication with and notifications to the Student regarding the Appeals Committee’s review and decision will be conveyed by the Chair to the Student, the program manager (or designee), and the program’s Registrar, within two (2) business days.
   3. The program manager or designee will communicate the Committee’s decision to the Wake Forest University School of Medicine Director of Enrollment Services.

**Please review the full Student Appeal of Dismissal Policy in our PolicyTech system.**
**Distance Education Policy**

1) General Policy Statement

Consistent with the SACSCOC policy on Distance and Correspondence Education, Wake Forest School of Medicine (SOM) defines Distance Education as “a formal educational process in which the majority of the instruction (interaction between students and instructors and among students) in a course occurs when students and instructors are not in the same place. Instruction may be synchronous or asynchronous. A distance education course may use the internet; one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices; audio conferencing; or video cassettes, DVD’s, and CD-ROMs if used as part of the distance learning course or program.” ([www.sacscoc.org](http://www.sacscoc.org))

a) Scope: This policy applies to all Distance Education courses offered by the Wake Forest School of Medicine and Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences.

b) Responsible Department/Party/Parties:

A. Policy Owner: Vice President & Associate Dean, Healthcare Education Administration
B. Procedure: Vice President & Associate Dean, Healthcare Education Administration
C. Implementation: Vice President & Associate Dean, Healthcare Education Administration

2) Definitions: For purposes of this Policy, the following terms and definitions apply:

a) The term “Student” is defined as a person who matriculates into, is enrolled in, or is taking courses in the Academic Nursing, the Physician Assistant (PA), or the Undergraduate Medical Education (MD) programs of Wake Forest School of Medicine or the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences programs (hereinafter jointly referred to as “School”).

b) The term “Credit Hour” is defined in accord with federal regulations as the amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency. The institutionally established equivalency is approximated using the Carnegie unit in accordance with commonly accepted practice in higher education.

3) Policy Guidelines:

a) Verification of Student Identity

i. Students enrolled in Distance Education courses will be issued a School of Medicine username and password to access electronic resources including the learning management system, library resources, examination systems, and other networks and systems (for example, Canvas, ECHO 360, Typhon, PeopleSoft, etc.).

ii. Students will be informed of and required to comply with the Wake Forest Baptist Health Confidentiality of Information Policy.

a. Consistent with the Confidentiality of Information Policy, students are prohibited from sharing their password with another person and from using another individuals’ password to access university-related systems.
b. Use of another student’s login information, such as to misrepresent the identity of the individual participating in class activities, assignments, or examinations, is considered a violation of the applicable program’s academic honor code and the student will be referred for review consistent with the applicable program’s policy.

iii. To verify that the student who registers in a Distance Education course and/or program is the same student who participates in and completes the course and/or program and received the credit, one or more of the following methods will be used:

a. At the required on-campus orientation, a copy of the student’s photo ID and one other form of ID such as a current medical license or billing with name and address will be obtained;

b. Each student is provided a secure login and pass code and will be required to use these credentials to log into the online courses;

c. Proctored examinations will require use of Proctor U, if examinations are used in a course.

b) Academic Integrity & Professionalism

i. Students in Distance Education courses are expected to comply with SOM and program-specific standards on professionalism and academic integrity.

1. Students will be required to acknowledge the applicable program’s Honor Code policy as well as the Wake Forest University Baptist Medical Center Confidentiality Agreement.

2. When videoconferencing is used in a course, login documentation will be recorded and visual tracking by instructors will occur.

ii. Students should also be familiar with the following other policies related to academic integrity and professionalism:

1. WFBMC Student Sexual Misconduct Policy
2. Student Substance Abuse Policy

c) Privacy of Student Information in Distance Education

i. The privacy of student education records about students enrolled in Distance Education courses will be maintained in accordance with the same policies and standards applicable to the privacy of student education records for students enrolled in other SOM programs.

d) Projected Student Charges

i. Projected additional student charges related to verification of student identity will be conveyed to students in writing via email or at the time of registration/enrollment.

a. The cost of attendance is also located on the Wake Forest School of Medicine Financial Aid website.

e) Academic Engagement for Students Relating to Financial Aid

i. If a degree seeking student or graduate certificate student who is utilizing federal loans for tuition and/or fees fails to login, submit an assignment, or meet another online course deadline,
and as a result is more than one week behind in coursework and the student has not contacted the instructor, the Program Director will contact the student via their Wake Forest Baptist Health email, explaining that they have one week to login and participate in the course or they will be subject to withdrawal procedures.

ii. If the student subsequently fails to login and participate in the course following at the end of the week following the notice from the Program Director as explained above, the Program Director will notify the student that an administrative withdrawal for lack of activity has begun.

iii. If the student plans to continue, the Program Director and the Course Instructor will determine a plan for the student to catch up, with any associated deductions for late work and implications for any missing assignments. The student would be considered active and there would be no financial implications.

iv. If the student responds and decides to withdraw, withdrawal procedures will be initiated. The student will be advised the decision is time sensitive and must be made within two business days. If the student does not reply within this time period, the administrative withdrawal procedure will begin immediately.

v. Students should also be familiar with the following other policies related to tuition and financial aid:
   1. Return of Federal Financial Aid Funds Policy
   2. Refund of Tuitions and Fees Policy

f) Compliance with the *Principles of Accreditation*

i. Mission

   a. The mission of the Wake Forest School of Medicine as stated on the school’s [website](http://example.com) applies to all Distance Education courses.

ii. Curriculum and Instruction

   a. Distance Education courses and programs maintain the same academic standards as those offered on the main campus.
   b. Distance Education courses and/or programs will be integrated into the regular planning process of the institution.
   c. Faculty remains responsible for the oversight of the rigor and quality of the instruction.
   d. Oversight and governance of Distance Education programming is incorporated into the governance of the SOM.

iii. Credit Hours

   Credit Hours for Distance Education courses are comprised as follows:

   a. Not less than one hour of classroom or direct faculty instruction and a minimum of two hours out of class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time, or
   b. At least an equivalent amount of work as required outlined in item 1 above for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.
iv. Faculty

a. All faculty, including adjunct faculty, directing an online course using asynchronous methodology will be required to complete training in distance education administered by the SOM.

b. Distance Education courses will be evaluated yearly using a quality assurance rubric to be completed by the certified personnel.

v. Instructional Effectiveness

a. The quality assurance rubric will be used to develop Distance Education courses along with Instructional Designers and course/program faculty subject matter experts.

b. Distance Education courses are expected to produce the same learning outcomes as comparable classroom-based courses.

c. The institution will evaluate the educational effectiveness of each Distance Education program, including assessment of student learning outcomes, student retention, and student satisfaction, to ensure comparability to campus-based programs.

vi. Library and Learning Resources

a. Students enrolled in Distance Education courses will have access to all library features made available through the Wake Forest School of Medicine Carpenter Library website.

vii. Student Services

a. Students enrolled in Distance Education courses will have access to student services such as:

1. Financial Aid
2. Admissions
3. Registrar
4. Student Affairs
5. Student Disability
6. Title IX Office
7. Student Counseling (if the student is located in the state of North Carolina)
   i. Students located outside of the state of North Carolina will be instructed to contact Student Counseling to discuss available options.

viii. Facilities and Finances

a. Wake Forest School of Medicine will maintain the appropriate infrastructure to support Distance Education.

b. Students enrolled in Distance Education courses will have access to the Wake Forest Baptist Health ITS team for technical support issues.

4) Review/Revision/Implementation

a) Review Cycle: This policy shall be reviewed at least every three (3) years from the effective date.
b) Office of Record: After authorization, the Legal Department shall house this policy in a policy database and shall be the office of record for this policy.

5) Related Policies:

   a) Information Security Policy
   b) Confidentiality of Information Policy
   c) Student Education Records Policy
   d) Return of Federal Financial Aid Funds Policy
   e) Refund of Tuitions and Fees Policy
   f) WFBMC Student Sexual Misconduct Policy
   g) Student Substance Abuse Policy
WFBH Confidentiality of Information

It is the policy of Wake Forest Baptist Health and Wake Forest School of Medicine to protect confidential information related to patients, donors, faculty, employees, trainees, students, research and the organization.

Confidential Information includes sensitive personal and institutional information and must be given the highest level of protection against unauthorized access, modification or destruction. Unauthorized access to personal Confidential Information may result in a significant invasion of privacy or may expose members of the WFBH community to significant financial risk. Unauthorized access or modification to Confidential Information may result in direct, materially negative impacts on the finances, operations, or reputation of WFBH. Examples of personal Confidential information include information protected under privacy laws (including, without limitation, the Health Insurance Portability and Accountability Act (HIPAA), the Family Educational Rights and Privacy Act (FERPA) and the Gramm-Leach-Bliley Act), information concerning the pay and benefits of WFBH employees, personal identification information or medical/health information pertaining to patients of WFBH, and data collected in the course of research on human subjects. Confidential Information also includes WFBH financial and planning information, legally privileged information, invention disclosures and other information concerning pending patent applications. Without limiting the generality of the foregoing, Confidential Information shall include “personal information” as defined by the North Carolina Identity Theft Protect Act. For information about WFBH’s policies regarding the confidentiality and security of Confidential Information, please see:

Full policy – Confidentiality of Information

Full policy - Information Security Policy
Medical Student Documentation in the Medical Record

1) General Policy Statement:

It is the policy of Wake Forest Baptist Medical Center (WFBMC) to allow medical students to document in the medical record. Any contribution and participation of a student to the performance of a billable Evaluation and Management (E&M) service must be performed in the physical presence of a teaching physician or physical presence of a resident. The teaching physician must perform (or re-perform) the physical exam and/or medical decision-making activities of the E/M service being billed but may verify any student documentation in the medical record, rather than re-documenting this work.

a) Scope: All WFBMC employees, faculty and staff are responsible for complying with this policy.

b) Responsible Department/Party/Parties:

i. Policy Owner: Audit and Compliance
ii. Procedure: Audit and Compliance, Medical Records, WFBMC Administration, Physician Services and Risk Management
iii. Supervision: Medical Records
iv. Implementation: Medical Records, WFBMC Administration, Medical Students, Providers

2) Definitions: For purposes of this Policy, the following terms and definitions apply:

a) WFBMC: Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), all on-site subsidiaries as well as those off-site governed by WFBMC policies and procedures.

b) Policy: As defined in the Policy on Creating and Amending Policy, a statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities of WFBMC. A policy may help to ensure compliance with applicable laws and regulations, promote one or more of the missions of WFBMC, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors and others are expected to operate.

3) Policy Guidelines:

The purpose of this policy is to ensure that documentation in the medical record by Medical Students complies with all rules and regulations related to the billing of professional services, while meeting our educational obligations and accreditation requirements.

A. Following appropriate orientation, HIPAA training and completion of security/confidentiality consents, students may document in the medical record, under the supervision of the teaching/Supervising Physician or Instructor.

B. Students can document in either the medical student note type (3rd or 4th year students) or team-based note type (3rd year only).

C. Prior to the beginning of each academic year, the Office of Medical Education will provide a list to ITS of the upcoming 3rd year medical students as well as a list of upcoming 4th year students that
should be removed from the team-based note access.

D. All medical record documentation must be appropriately signed, titled, dated and approved by the student.

E. The documentation must be clearly identified as medical student documentation.

F. Teaching physicians are responsible for ensuring that students do not misuse copy/paste and carry forward functionalities within the EHR. (see policy Electronic Medical Record Documentation - Use of Copy, Paste, Carry Forward, Cloning).

G. Clinical Departments that plan to use the medical student documentation workflow must contact the Office of Medical Education for instructions regarding the process and as described below.

H. The Teaching/Supervising Physician or Resident should follow attached guidelines on how to import Medical Student notes into the physician progress notes.

I. The Teaching/Supervising Physician must personally perform (or re-perform) the physical exam and medical decision-making activities of the E&M service being billed. Any student documentation related to these billable E&M elements must be verified by the teaching physician.

J. Teaching/Supervising Physicians or Instructors must attest to the accuracy of the student’s documentation, (i.e. A student assisted with documenting this service. I saw and evaluated the patient and verified all information documented by the medical student and resident and made modifications to such information, when appropriate.”)

K. Any E&M documentation that includes medical student documented information but does not meet the criteria as stated above may be considered non-billable physician services.

4) Review/Revision/Implementation
   a) Review Cycle: This policy shall be reviewed by Audit & Compliance at least every 3 years from the effective date.
   b) Office of Record: After authorization, the Legal Department shall house this policy in a policy database and shall be the office of record for this policy.

5) Related Policies:
   - Medical Student Supervision During Clinical Activities
   - Electronic Medical Record Documentation - Use of Copy, Paste, Carry Forward, Cloning

6) Governing Law or Regulations:
   - CMS – Medicare Claims Processing Manual Chapter 12 100.1.1 - Evaluation and Management (E/M) Services (Rev. 3971, Issued: 02-02-18, Effective: 01-01-18, Implementation: 03-05-18)

7) Associated Documents/Files:
   - Tip Sheet Ambulatory Medical Student Documentation
   - Tip Sheet IP Medical Student Documentation

8) Revision Dates:
   2/13, 3/17, 12/18
Authorship on Scientific and Scholarly Publications Policy

PURPOSE

It is the policy of Wake Forest Baptist Health (WFBH) to ensure scholarly integrity and responsible conduct in the reporting of research results.

The purpose of this policy is to provide the principles and criteria used to determine appropriate authorship and the process to follow in resolving authorship disputes.

SCOPE

This policy applies to faculty, staff, students, trainees, and other individuals engaged in research activities conducted at WFBH or its affiliates.

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), HighPoint Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES

A. General Principles and Right Conduct

Scientific and scholarly publications, defined as articles, abstracts, presentations at professional meetings and grant applications, provide the main vehicle to disseminate findings, thoughts, and analysis to the scientific, academic, and lay communities. For academic activities to contribute to the advancement of knowledge, they must be published in sufficient detail and accuracy to enable others to understand and replicate the results. For the authors of such work, successful publication improves opportunities for academic funding and promotion while enhancing scientific and scholarly achievement.

The benefits of authorship are accompanied by a number of responsibilities for the proper planning, conduction, analysis, and reporting of research, and the content and conclusions of scholarly work.

B. Criteria for Defining Authorship:

An author is generally considered to be an individual who has made substantial intellectual contributions to a scientific investigation. It is expected that authorship will be agreed upon before initiation of the project and submission of the resulting manuscript(s). It is the responsibility of the senior author to ensure compliance that all authors have the opportunity to participate in the preparation of the manuscript and to approve it before submission. All authors should meet the following four (4) criteria:

1. Contribute significantly to the conception, design, execution, and/or in the analysis and interpretation of data
2. Participate in drafting, reviewing, and/or revising the manuscript for intellectual content

3. Approve the version of the manuscript to be published

4. Be able to explain and defend in public or scholarly settings that portions of the study for which he or she was directly responsible.

It is recognized that definitions of authorship differ among the various scientific disciplines and professional journals, as may standards for “substantial” and “scholarly effort.” For example, design/development of research equipment, or collection of a specific data set, may be substantial scholarly effort in certain disciplines. The expectation of this policy is that standards and criteria for authorship in an academic discipline will be widely recognized and consistent across that discipline (including Wake Forest School of Medicine), and consistent with the journal (publication) in which the work appears.

A. Responsible (Lead) Author:

One investigator who meets the criteria for authorships is designated as the Responsible or Lead Author.

The Responsible Author
- assumes overall responsibility for each publication (e.g., primary research report, abstract, review article, book chapter) submitted for WFSM
- is typically the faculty member who leads the study and assumes the responsibility for coordinating and completing the work, drafting of the manuscript, satisfying pertinent rules for submitting the manuscript and any required revisions

Authorship on Scientific and Scholarly Publications Policy

- is not necessarily the principal investigator or project leader and does not necessarily have to be the first author (e.g., often the last author)
- often serves as the managerial and corresponding author
- addresses authorship disagreements and ensures that authors meet the criteria listed in this policy, as appropriate
- should exercise due diligence in ensuring the validity and integrity of the entire manuscript

B. Order of Authorship:

The selection of the Responsible (Author, the involvement of collaborator(s) as co-authors, and the order of authorship is ideally determined by the research team as a whole. Plans regarding authorship and its order are best determined before the study begins and any disputes resolved at that time. It is not possible for the School to define the order of authorship. A written memo attesting to this determination is valuable documentation if a dispute subsequently arises. Changes in authorship plans, which take place as a study proceeds, should be documented in writing.

The Responsible Author should assure that all collaborators are appropriately recognized and that study collaborators listed as co-authors meet the criteria for authorship described in this policy.

1. Co-authors

All co-authors of a publication are responsible for providing consent to authorship to the Responsible Author prior to submission. By providing consent to authorship to the responsible author, co-authors are acknowledging that they have reviewed and approved the manuscript, including the validity and integrity of the manuscript.

2. Students, Fellows, and Research Associates

All persons designated as authors should qualify for authorship as defined in this policy. Faculty should be
aware of their responsibility to ensure that students, postdoctoral fellows, and other research associates who participate substantively in the preparation of manuscripts are recognized as authors in publications covering the results of research in which they were active participants.

3. Acknowledgments

Individuals who have made some contribution to the publication, but who do not meet the criteria for authorship, such as staff, editorial assistants, medical writers, or other individuals can provide a valuable contribution to the writing and editing of publications. Since those contributions do not meet the criteria for authorship under this policy, those individuals should be listed in an acknowledgment and/or contributorship section of the work.

4. Multi-Authorship/Multi-Center Manuscripts

Team science, which can involve many scientists across many disciplines and many institutions, demands careful use of authorship criteria. Sadly, some such studies have led to publications for which no single author was prepared to take full responsibility.

In studies of this type, the Responsible Author should make reasonable efforts to ensure adequate quality of research overall, and among the reasons for the final list of authors, the order should reflect the level of responsibility for quality assurance.

In large studies where quality assurance is distributed, it is essential that each participating investigator verifies the sections of a manuscript within his or her specialty for accuracy and to assure that the list of co-authors who conducted the work described in these sections is valid and appropriate. All authors should approve the final version of a manuscript and be prepared to take public responsibility for the work, as appropriate.

5. Unacceptable Authorship

An administrative relationship, acquisition of funding, collection of data, or general supervision of a research group alone does not constitute eligibility for authorship. In addition, the referral of patients included in a clinical study does not in and of itself warrant co-authorship status.

Guest, gift, and ghost authorship are also inconsistent with the definition of authorship in this policy and are unacceptable.

a. **Guest (honorary, courtesy, or prestige)** authorship is defined as granting authorship out of appreciation or respect for an individual, or in the belief that expert standing of the guest will increase the likelihood of publication, credibility, or status of the work.

b. **Gift** authorship offered out of a sense of obligation, as tribute, due to dependence, or in the hopes of an anticipated benefit.

c. **Ghost** authorship is an act of omission, whereby mention of a significant contributor is intentionally absent. Ghostwriters can be an example when the writing itself is of such value that it warrants credit, either as an author or by another form of acknowledgement. Omission might also occur to avoid controversy, notoriety, or to hide the appearance of a conflict of interest. It is unacceptable when the reader would reasonably expect to be made aware of the time of reading in order to understand the work in the proper context.

6. Detrimental Authorship Practices to Avoid:

a. **Salami Publication** involves the slicing of data collected during a single research study into different pieces that form the basis of individual published manuscripts in the same or different journals. The practice is not appropriate when it increases the number of publications intentionally at the expense of the reader.

b. **Premature Public Statements** – Publicly announcing research results prior to peer-review runs the risk
of misleading the public and undermining the credibility of research institutions and individual scientists when later peer-review finds significant criticism.

C. Duplicate Publication (sometimes called Self-plagiarism) – Republishing parts of your own work, such as previously published data sets or parts of previously written work without properly attributing the prior work.

7. Disputes over Authorship

In general, authorship issues and related matters should be freely discussed and decided upon early during the research process and prior to writing the manuscript. However, agreements relating to authorship may need to be changed during the collection of data and preparation of the manuscript. Possible disagreements include interpretation of the criteria for authorship, order of authors, editorial control of content and focus of the manuscript, selection of journal or other publication media, and choice of Responsible Author.

Disagreements between or among authors should be resolved in a collegial manner by the Responsible Author in consultation with the other author(s), relevant research personnel, and any other individual who claims authorship. Generally, the Responsible Author has the primary responsibility for making decisions on authorship and other matters related to the publication of manuscripts.

When matters of authorship and related issues cannot be resolved in a satisfactory manner by the Responsible Author, other author(s), research personnel, and other individuals who claim authorship, the Responsible Author and/or other author(s)/research personnel should present their controversy in writing to the Department Chair. The manuscript in question should not be submitted for publication before these issues are resolved. The Departmental Chair should meet with the individuals involved in the dispute, collect, and retain appropriate information, and make a recommendation in writing. When the authorship dispute involves the Chair, or if the dispute involves more than one department, then a neutral mediator will be appointed by the Vice President, Research Administration and Operations, or designee.

In the event that a satisfactory resolution is not achieved by the Departmental Chair or by a neutral mediator, then the Vice President, Research Administration and Operations/designee will appoint three senior faculty members to investigate the dispute. The review group will not include individuals with personal responsibility for the research, but should include faculty members with unique qualifications relative to the dispute in question (i.e., research expertise, training of graduate students, experience with clinical trials, active peer-reviewed research, etc.). In addition, the Research Integrity Officer will serve as an ad hoc member. In the case of disputes involving a faculty member from another school within Wake Forest University, a member of the review groups should be on the faculty of the affected school. The review group will make a recommendation in writing to the Vice President, Research Administration and Operations and he/she will evaluate this recommendation and render a decision. The decision of the Vice President, Research Administration and Operations is final.

8. Disputes Over Authorship in Multi-Center Studies

Publication, presentation, and authorship policies should be determined and accepted by all participating investigators at the beginning of any multi-center study. Specifically, it is recommended that a Publication Subcommittee representing all Investigators should be established at the beginning of any multi-center study for the purpose of expediting, coordinating, and monitoring the publication processes. Inherent in these charges is the responsibility to adjudicate disputes over authorship.

If a dispute between investigators from separate centers does arise, the solution to the dispute should arise from within the organizational structure of the multi-center study. If a dispute cannot be resolved, the principle of academic freedom generally indicates that an investigator has the right to present those data for which he/she is contract custodian. However, this right should be tempered by the concept of collegial collaboration. It is unacceptable for an investigator to publish or present study findings before the total group of study investigators has had a reasonable opportunity to do so.
9. **Financial Conflicts of Interest**

Authors should fully disclose, in all manuscripts to journals, grant applications, and at professional meetings, all relevant financial interests that could be reviewed as a potential conflict of interest or, as required by the WFSM and/or journal. All such financial interest must also be reported internally as required by the Medical Center’s conflict of interest policies.

10. **Scientific Misconduct**

Scientific Misconduct defined as fabricating data, falsifying data, and plagiarism (knowingly representing the work of others as one’s own) are serious violations of our mission and the public trust. The policies and procedures for handling allegations of Misconduct in Research are outlined in the Research Integrity Policy.

11. **Violations of the Policy**

Knowingly, intentional, or reckless violations of this policy will be referred to the Vice President, Research Administration and Operations/designee. Violations of the policy that rise to the level of research misconduct, as defined by the Wake Forest School of Medicine’s Research Integrity Policy, will be referred to the Research Integrity Office. Disputes regarding the order of authorship do not, in and of themselves, constitute a violation of this policy.

**REVISION DATES**

4/13, 10/16, 4/20, 11/20
**WFBMC Policy on Research Integrity**

It is in the best interest of the public and of academic medicine to prevent misconduct in research and to deal effectively and responsibly when misconduct is alleged or substantiated. The maintenance of public trust requires adherence to the ethical principles that govern scientific research, and is the responsibility of the faculty, staff, and administration of an academic medical center to ensure the credibility and trustworthiness of research conducted.

It is the policy of Wake Forest Baptist Health to inquire into and, if necessary, to investigate and resolve in a timely and fair manner all instances of alleged research misconduct and to comply with sponsor requirements for reporting cases of possible misconduct when sponsored project funds are involved.

This policy applies to faculty, staff, students, trainees, and other individuals engaged in research activities conducted at WFBH or its affiliates.

This policy does not address, and specifically excludes, fiscal improprieties and issues concerning the ethical treatment of human or animal subjects, authorship disputes, sexual harassment or discrimination, general matters not within the definition of scientific misconduct and criminal matters.

In addition, because of the inherent unfairness and the difficulties presented by any attempt to assess stale evidence, allegations of misconduct based on events that occurred six or more years ago will not be subject to review under this policy unless clear and convincing mitigating circumstances are present, as determined by the Research Integrity Officer.

Full Policy – [WFBMC Policy on Research Integrity](#)
Data Ownership Policy

1) **Originator:** Committee/Director/Administrator (Title only)

2) **Scope:** This policy applies to faculty, staff, students, trainees and other individuals engaged in research activities conducted at WFBH or its affiliates.

3) **General Policy Statement (WFBH and its Affiliates / CTSI – Regulatory Affairs)**

   It is the policy of Wake Forest Baptist Health (WFBH) to oversee research data collection, retention, and disposition.

   The purpose of this policy is to describe the basis of data ownership and the standards for the collection and retention of data, in addition to requirements for data access.

4) **Policy Guidelines:**

   **Ownership and Responsibilities**

   Unless superseded by specific terms of sponsorship and contractual agreement or university policy, WFBH owns all research data developed or acquired by the faculty, fellows, students and employees of WFBH through research projects conducted at or under the auspices of WFBH, regardless of funding source. Although WFBH, as owner of the research data, must meet the requirements of sponsors for custodians of research data, Principal Investigators (PIs) and other researchers are stewards of research data, and shall retain the principal responsibility for custody of the data.

   1. **Access to Research Data**

      Research data are to be accessible to members of the WFBH community, external collaborators, and others as appropriate (e.g., patent applications or journal submissions). The Principal Investigator has primary responsibility for oversight and access to the Research Data generated by the project. Any other faculty, staff, student, or person involved in the creation of Research Data may have the right to review that portion of the Research Data that he or she created. WFBH will have access to the Research Data as necessary for technology transfer, compliance, and other purposes. The University also has the option to take custody of the Research Data as determined by the appropriate institutional official. Such option will not be invoked without cause and subsequent notification of the Principal Investigator. In some instances, a research sponsor has a legal right of access or access may be requested through the sponsoring agency under the federal Freedom of Information Act (FOIA). Requests for data access will be coordinated through the CTSI Office of Regulatory Affairs and Research Integrity.

      In cases of multi-institutional studies, the institution of the primary study director shall be responsible for arranging appropriate access to, use of, and retention of Research Data unless otherwise specified in the terms of the particular study.

      When necessary, to assure needed and appropriate access, (e.g. research misconduct investigations) WFBH may take custody of research data in a manner specified by the Research Integrity Policy.

      WFBH’s responsibilities with respect to research data include, but are not limited to:

      - Complying with the terms of sponsored agreements;
      - Ensuring the appropriate use of project resources (e.g. animals, human subjects, recombinant DNA, biological agents, radioactive materials, etc.);
• Protecting the rights of researchers, including but not limited to their rights to access to data from research in which they participated; and
• Maintaining confidentiality of research data, where appropriate and as may be required pursuant to the terms of an applicable sponsored agreement.

The PI’s responsibilities with respect to research data include, but are not limited to:
• Ensuring proper management and retention of data in accordance with this policy;
• Establishing and maintaining appropriate procedures for the protection of research data and other essential records, particularly for long-term research projects;
• Ensuring compliance with sponsor program requirements;
• Maintaining confidentiality of research data, where appropriate and as may be required pursuant to the terms of an applicable sponsored agreement; and
• Complying with applicable state and federal laws and regulations.

2. Data Retention
It is the responsibility of the PI to preserve, where feasible, all research data generated at WFBH for a minimum period of five (5) years from the date of the last publication or the date of the final report issued upon completion of the project, whichever is later. In addition, any of the following circumstances may justify longer periods of retention:

• Research data must be kept for as long as may be necessary to protect any intellectual property resulting from the work;
• If litigation or other dispute resolution, claim, financial management review or audit related to the research project is started before the expiration of the five year period, or commenced after the five year period, the research data and other project records must be retained until all litigation/dispute resolution, claims, financial management review or audit findings involving the records have been resolved and final action taken;
• If any charges regarding the research arise, such as allegation of research misconduct, research data must be retained in a manner consistent with WFBH’s policy on Research Integrity, or as otherwise instructed by the CTSI’s Office of Research Integrity or Office of General Counsel; and
• When research is funded by an award to or contract with WFBH that includes specific provisions regarding ownership, retention of and access to technical data, the provisions of that agreement will supersede this Policy
• If a student or trainee is involved in research that research data must be retained at least until the degree is awarded to the student, the training is complete, or it is clear that the student has abandoned the work.

Beyond the period of retention specified here, the destruction or permanent de-identification of research data is at the discretion of the PI. Destruction of research data must follow applicable federal regulations, sponsor requirements and other applicable guidelines.

Research data will normally be retained by the unit/Department where they were produced, in accordance with WFBH practices for the secure storage of information.

3. Transfer in the event a researcher leaves WFBH
When a PI for a research project leaves the employment of WFBH, and the research project will no longer be conducted at WFBH, but instead moved to another institution, ownership of the original data may be transferred from WFBH to the PI’s new institution upon request from the PI. An agreement on the disposition of research data must be negotiated between the PI and his/her department chair, in consultation with the Office of Regulatory Affairs within the CTSI,
concerning possession of research data, notebooks, and other data retention materials and unique resources to be transferred to the departing investigator. If the departing faculty member is the department chair, he or she will work directly with the Office of Regulatory Affairs and Research Integrity. To fulfill obligations to funding sources and others, such agreements may provide for WFBH to retain copies of the research data, where feasible.

In the event that research data must remain at WFBH, as mandated by WFBH, by law, or as required by the funding agency or commercial sponsor or other applicable policies, the PI will have the right to access and, where practical, to copy such research data produced by him/her subject to any restrictions set forth in a sponsored agreement.

Upon the death of a PI, the Department Chair shall appoint a researcher to assume stewardship of the research data.

When individuals other than the PI, such as collaborating investigators, fellows, students or other trainees, leave WFBH, they may take copies of research data for projects on which they have worked or have the right to reasonable access to such data, subject to relevant confidentiality restrictions and/or restrictions set forth in a sponsored agreement.

4. Research Data Ownership Policy Oversight and Dispute Resolution

The Office of Regulatory Affairs and Research Integrity within the CTSI, under the direction of the Vice President for Research Administration and Operations, has responsibility for oversight of, and resolution of, disputes resulting from this policy. In an investigator desires to contest the decision of the Vice President for Research Administration and Operations, the investigator may file a written appeal to be reviewed by a committee of researchers, appointed by the Office of Regulatory Affairs and Research Integrity.

5) Definitions:

a) **WFBH**: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Imaging (WFI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

b) **Policy**: As defined in the Policy on Creating and Amending Policy, a statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities of WFBH. A policy may help to ensure compliance with applicable laws and regulations, promote one or more of the missions of WFBH, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors and others are expected to operate.

c) **Research**: Is a systematic investigation designed to develop or contribute to knowledge and may include the stages of development, testing, and evaluation.

d) **Research Data**: Are all information in whatever form (e.g., both physical and electronic). For the purposes of this policy, Research Data are further defined as including any records that would be used for the reconstruction and evaluation of reported or otherwise published results. Research Data also includes materials such as unmodified biological specimens and environmental samples. Research Data differ among disciplines. Examples of Research Data and Materials include laboratory and other notebooks, notes of any type, photographs, films, digital images, original biological and environmental samples, protocols, numbers, graphs, charts, numerical raw experimental results, instrumental outputs from which
Research Data can be derived, case report forms, patient charts, and other source documentation for human research studies.

6) Review/Revision/Implementation

**Review Cycle:** This policy shall be reviewed by the CTSI – Regulatory Affairs at least every three (3) years from the effective date.

7) Related Policies

Policy on Research Integrity Intellectual Property Policy
Policy for Authorship on Scientific and Scholarly Publications

8) Governing Law/Regulations/References

None

9) Attachments

None
Wake Forest School of Medicine complies with the requirements of section 3679 of Title 38, U.S. Code.

A student who has been admitted to a Wake Forest School of Medicine program and who is entitled to educational assistance under chapter 31, Vocational Rehabilitation and Employment, or chapter 33, Post-9/11 GI Bill® benefits, is permitted to attend or participate in the course of education without making payment for tuition and fee amounts to be covered by the VA education benefits. Such attendance or participation may begin on the date on which the student provides a VA Certificate of Eligibility and end on the earlier of the following dates:

1. The date on which payment from the VA is made to the School of Medicine.
2. Ninety (90) days after the date the School of Medicine certified tuition and fees following the receipt of the certificate of eligibility.

Students receiving VA educational benefits will be required to pay the difference between the amount owed on their student account and the amount of the VA education benefit disbursement within 10 days of the start of the term.

Wake Forest School of Medicine will not impose any penalty, including the assessment of late fees, the denial of access to classes, libraries, or other institutional facilities, or the requirement that a student receiving Chapter 31 or 33 benefits borrow additional funds due to the delayed disbursement of funding from the VA.

Using VA Education Benefits

Questions about eligibility for benefits should be directed to the VA. Apply for benefits: https://www.va.gov/education/how-to-apply

While the application for VA benefits may begin while the student is in the process of applying to a School of Medicine program, students should be admitted to the program before submitting documents to the Office of Student Records.

- Admitted students must receive a Certificate of Eligibility (COE) from the VA outlining the benefits and eligibility period and submit the COE to the Office of Student Records. A screen shot of the eBenefits Web page, or a VAF 28-1905 form for chapter 31 authorization purposes will also be accepted.
- The COE can be submitted via email to: studentrecords@wakehealth.edu or delivered in person to: 475 Vine Street, Winston Salem, NC 27101 or by U.S. Mail to PO Box 573183, Winston Salem, NC 27157

Shortly after receiving the COE, the Office of Student Records will conduct a review of documents needed for the student’s VA file. Students will be notified by the Office of Student Records if they are responsible for providing any further documentation.

“GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government Web site at https://www.benefits.va.gov/gibill.”
Financial Aid

Fees and Expenses

Tuition is payable at the beginning of each semester. As a requirement for graduation, all students are required to pay full annual tuition for each academic year enrolled in Wake Forest School of Medicine. Students who do not make tuition payments or satisfactory arrangements with the Student Financials office will not be eligible to continue classes or receive credit for course work.

Breakage deposits are not required but students will be held financially responsible for loss or damage to School of Medicine property.

Cost of attendance includes only those expenses associated with the student. Living expenses for the spouse and/or other dependents are not recognized as part of the student’s standard cost of attendance. The cost of attendance, as defined by the school, represents the maximum amount of student financial aid a student can receive.

Statements in the Student Handbook concerning expenses and courses cannot be considered an irrevocable contract between the student and the School of Medicine. The School of Medicine reserves the right to change requirements for graduation, schedules, and costs of instruction at any time during the student’s enrollment.

Tuition changes authorized by the Board of Trustees will become effective at the opening of the next session after adoption.

Doctor of Medicine Program Tuition and Fees 2021-2022

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<td></td>
<td>$650</td>
</tr>
<tr>
<td>Laptop Allowance</td>
<td>$1,222</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td>$4,800</td>
<td>$4,800</td>
<td>$5,760</td>
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<tr>
<td>Health Insurance</td>
<td>$4,080</td>
<td>$4,080</td>
<td>$4,080</td>
<td>$4,080</td>
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<tr>
<td>Loan Fees</td>
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<tr>
<td>Lodging</td>
<td>$8,500</td>
<td>$8,500</td>
<td>$10,200</td>
<td>$9,350</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>$1,920</td>
<td>$1,920</td>
<td>$2,304</td>
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<td>Transportation</td>
<td>$2,920</td>
<td>$2,920</td>
<td>$3,504</td>
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<td>Total</td>
<td>$91,700</td>
<td>$89,900</td>
<td>$94,290</td>
<td>$91,500</td>
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### Physician Assistant Program Tuition and Fees 2021-2022

<table>
<thead>
<tr>
<th></th>
<th>First Year Winston Salem</th>
<th>First Year Boone</th>
<th>Second Year</th>
</tr>
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<tr>
<td>Tuition</td>
<td>$42,700</td>
<td>$42,700</td>
<td>$42,700</td>
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<tr>
<td>Books and Equipment</td>
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<td>$1,600</td>
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<tr>
<td>Professional Exam</td>
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<tr>
<td>Drug Test</td>
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<td>$70</td>
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<td>Food</td>
<td>$5,760</td>
<td>$5,760</td>
<td>$5,760</td>
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<tr>
<td>Health Insurance</td>
<td>$3,848</td>
<td>$3,848</td>
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<td>Loan Fees</td>
<td>$2,566</td>
<td>$2,606</td>
<td>$2,485</td>
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<td>$8,400</td>
<td>$8,400</td>
<td>$8,400</td>
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<td>Miscellaneous</td>
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<td>$2,160</td>
<td>$2,160</td>
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<tr>
<td>Student Fees</td>
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<td>$3,240</td>
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<td>Utilities</td>
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<tr>
<td>Allowance</td>
<td></td>
<td>$1,012</td>
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<td>Total</td>
<td>$78,494</td>
<td>$79,546</td>
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### CRNA Tuition and Fees 2021-2022

<table>
<thead>
<tr>
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<th>First Year</th>
<th>Second Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$36,650</td>
<td>$36,650</td>
</tr>
<tr>
<td>Books and Equipment</td>
<td>$1,400</td>
<td>$1,400</td>
</tr>
<tr>
<td>Food</td>
<td>$5,760</td>
<td>$5,760</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>$4,080</td>
<td>$4,080</td>
</tr>
<tr>
<td>Loan Fees</td>
<td>$2,300</td>
<td>$2,295</td>
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<td>Lodging</td>
<td>$10,200</td>
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<td>Miscellaneous</td>
<td>$2,303</td>
<td>$2,303</td>
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<tr>
<td>Program Fees</td>
<td>$2,150</td>
<td>$2,150</td>
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<td>Transportation</td>
<td>$3,504</td>
<td>$3,504</td>
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<tr>
<td>Utilities</td>
<td>$3,540</td>
<td>$2,540</td>
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<tr>
<td>Laptop Allowance for 1st year students</td>
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</tr>
<tr>
<td>Total</td>
<td>$73,109</td>
<td>$71,882</td>
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Doctor of Nursing Practice Tuition and Fees 2021-2022

<table>
<thead>
<tr>
<th>DNP Program</th>
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<tbody>
<tr>
<td>Tuition</td>
<td>$36,650</td>
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</tr>
<tr>
<td>Books and Equipment</td>
<td>$1,400</td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td>$5,760</td>
<td></td>
</tr>
<tr>
<td>Health Insurance</td>
<td>$4,080</td>
<td></td>
</tr>
<tr>
<td>Loan Fees</td>
<td>$2,300</td>
<td></td>
</tr>
<tr>
<td>Lodging</td>
<td>$10,200</td>
<td></td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>$2,303</td>
<td></td>
</tr>
<tr>
<td>Program Fees</td>
<td>$2,150</td>
<td></td>
</tr>
<tr>
<td>Transportation</td>
<td>$3,504</td>
<td></td>
</tr>
<tr>
<td>Utilities</td>
<td>$3,540</td>
<td></td>
</tr>
<tr>
<td>Laptop Allowance</td>
<td>$1,222</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>$73,109</td>
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Graduate School Programs Tuition and Fees 2021-2022

<table>
<thead>
<tr>
<th></th>
<th>PhD Program (12 Months)</th>
<th>MS Program Continuing (12 months)</th>
<th>MS Program (12 Months)</th>
</tr>
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<tr>
<td>Tuition</td>
<td>$39,860</td>
<td>$40,210</td>
<td>$39,390</td>
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<td>$600</td>
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<tr>
<td>Food</td>
<td>$5,760</td>
<td>$5,760</td>
<td>$5,760</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>$4,080</td>
<td>$4,080</td>
<td>$4,080</td>
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<tr>
<td>Loan Fees</td>
<td>$2,300</td>
<td>$2,300</td>
<td>$2,300</td>
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<tr>
<td>Lodging</td>
<td>$10,200</td>
<td>$10,200</td>
<td>$10,200</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>$2,304</td>
<td>$2,304</td>
<td>$2,304</td>
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<tr>
<td>Transportation</td>
<td>$3,504</td>
<td>$3,504</td>
<td>$3,504</td>
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<tr>
<td>Utilities</td>
<td>$3,540</td>
<td>$3,540</td>
<td>$3,540</td>
</tr>
<tr>
<td>Total</td>
<td>$70,097</td>
<td>$72,498</td>
<td>$71,678</td>
</tr>
</tbody>
</table>

*Full-time enrollment; Summer, Fall & Spring Terms per credit hour cost: $1,510
Tuition Payments

Wake Forest School of Medicine will maintain records of student charges including tuition, insurance, vaccine charges and any other miscellaneous items charged to the student account. Students may view their student accounts and make electronic payments from their checking or savings account online via PeopleSoft Campus Solutions Self-Service. Also the Student Financials Office accepts paper checks or money orders for payment on your student account. If payments are not received within 10 days of classes starting, Wake Forest School of Medicine will charge interest at the prevailing bank rates on tuition payments. Students will not be eligible to advance in the curriculum and will be withdrawn if the balance is not paid in full within 90-days of first notification. Students who are on a Leave of Absence and have an outstanding balance should refer to the Leave of Absence policy. Upon matriculation and once each academic year that follows, students will be required to sign a Payment Responsibilities Agreement.

**Doctor of Medicine Program 2021-2022**

<table>
<thead>
<tr>
<th>Term</th>
<th>Year</th>
<th>Tuition Amount</th>
<th>Due by Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall</td>
<td>First Year</td>
<td>$30,600.00</td>
<td>07/16/2021</td>
</tr>
<tr>
<td></td>
<td>Second Year</td>
<td>$30,600.00</td>
<td>07/22/2021</td>
</tr>
<tr>
<td></td>
<td>Third Year</td>
<td>$30,600.00</td>
<td>06/3/2021</td>
</tr>
<tr>
<td></td>
<td>Fourth Year</td>
<td>$30,000.00</td>
<td>05/27/2021</td>
</tr>
<tr>
<td>Spring</td>
<td>First Year</td>
<td>$30,600.00</td>
<td>12/16/2021</td>
</tr>
<tr>
<td></td>
<td>Second Year</td>
<td>$30,600.00</td>
<td>03/10/2022</td>
</tr>
<tr>
<td></td>
<td>Third Year</td>
<td>$30,600.00</td>
<td>11/25/2021</td>
</tr>
<tr>
<td></td>
<td>Fourth Year</td>
<td>$30,000.00</td>
<td>11/11/2021</td>
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</table>

**Physician Assistant Program 2021-2022**

<table>
<thead>
<tr>
<th>Term</th>
<th>Year</th>
<th>Tuition &amp; Fees Amount</th>
<th>Due by Date</th>
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</thead>
<tbody>
<tr>
<td>Summer</td>
<td>First Year</td>
<td>$13,345</td>
<td>06/14/2021</td>
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<td></td>
<td>Second Year</td>
<td>$11,686</td>
<td>05/27/2021</td>
</tr>
<tr>
<td>Fall</td>
<td>First Year</td>
<td>$14,310</td>
<td>09/23/2021</td>
</tr>
<tr>
<td></td>
<td>Second Year</td>
<td>$16,632</td>
<td>09/02/2021</td>
</tr>
<tr>
<td>Spring</td>
<td>First Year</td>
<td>$19,080</td>
<td>01/13/2022</td>
</tr>
<tr>
<td></td>
<td>Second Year</td>
<td>$16,632</td>
<td>01/13/2022</td>
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</tbody>
</table>
### Academic Nursing Programs 2021-2022

#### Master’s Degree

<table>
<thead>
<tr>
<th>Semester</th>
<th>Tuition &amp; Fees Amount</th>
<th>Due by Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fall</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Year</td>
<td>$12,130 ($1,450 Holding Fee Credit Applied)</td>
<td>08/26/2021</td>
</tr>
<tr>
<td>Second Year</td>
<td>$13,580</td>
<td>08/26/2021</td>
</tr>
<tr>
<td><strong>Spring</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Year</td>
<td>$13,580</td>
<td>01/13/2022</td>
</tr>
<tr>
<td>Second Year</td>
<td>$13,580</td>
<td>01/13/2022</td>
</tr>
<tr>
<td><strong>Summer</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Year</td>
<td>$11,639</td>
<td>05/19/2022</td>
</tr>
<tr>
<td>Second Year</td>
<td>$11,639</td>
<td>05/19/2022</td>
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</table>

### Doctor of Nursing Practice 2021-2022

<table>
<thead>
<tr>
<th>Semester</th>
<th>Tuition &amp; Fees Amount</th>
<th>Due by Date</th>
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<tbody>
<tr>
<td><strong>Fall</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Year</td>
<td>$4,041 ($1,450 Holding Fee Credit Applied)</td>
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<td>Second Year</td>
<td>$5,491</td>
<td>8/26/2021</td>
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<tr>
<td><strong>Spring</strong></td>
<td></td>
<td></td>
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<tr>
<td>First Year</td>
<td>$8,101</td>
<td>1/13/2022</td>
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<td>Second Year</td>
<td>$6,796</td>
<td>1/13/2022</td>
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<tr>
<td><strong>Summer</strong></td>
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<tr>
<td>First Year</td>
<td>$8,063</td>
<td>5/19/2022</td>
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<tr>
<td>Second Year</td>
<td>$6,758</td>
<td>5/19/2022</td>
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### Graduate School of Arts and Sciences – Biomedical Sciences 2021-2022

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<th>MS &amp; PhD</th>
<th>Tuition Amount</th>
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<td>Fall 2021</td>
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</tr>
<tr>
<td>Spring 2022</td>
<td>$19,325</td>
<td>01/20/2022</td>
</tr>
</tbody>
</table>
Financial Assistance

Assistance is available for students who, for financial reasons, could not otherwise attend medical school. Scholarships and loans are awarded in accordance with criteria governing each source of funds and on the basis of need. In all cases, parental income information is required and will be considered in determining awards from the School of Medicine’s resources.

Financial Assistance to Incoming Students
Applicants are provided general information about aid and appropriate application resources. On request, individual consultations with a financial aid representative can be arranged. Financial aid application materials must be completed and returned to the Financial Aid Office prior to March 15. When an applicant is accepted, the Financial Aid Office is notified. Upon receipt of required application materials, an estimate of available aid will be determined, and the student will be notified as soon as possible.

Financial Assistance to Upper-class Students
In the spring, the Financial Aid Office will notify all upper-class students of procedures to be followed for the next academic year. Applications must be completed and returned to the Financial Aid Office on or before March 15.

Endowed Scholarships
A list of available scholarships may be found at https://school.wakehealth.edu/About-the-School/Alumni-Relations/Catalyst/Catalyst-Spring-2019/Scholarship-FAQ. This page is updated as fund agreements are finalized for scholarship funds.

Federal Scholarships
Scholarships are available to U.S. citizens through the Armed Forces Health Service and the National Health Service Corps. Selection is competitive. Interested parties should review information from the following:

Army: http://www.goarmy.com/amedd/education/hpsp.html
Navy: https://www.navy.com/careers/healthcare.html

National Health Service Corps (NHSC): http://nhsc.hrsa.gov/scholarships/

Veteran’s Education Benefits
All veterans and their dependents seeking veteran educational benefits must first apply for those benefits through the Department of Veterans Affairs (VA). Veterans with questions about their eligibility for the various VA educational benefit programs should first consult the VA to determine their eligibility for specific programs. Contact Information: https://www.benefits.va.gov/gibill/

NOTE: Only degree programs are eligible for veteran’s benefits at Wake Forest School of Medicine. All approvals are subject to change.

VA Certification Contacts for School of Medicine Programs:
Doctor of Medicine Program – Ms. Susan Pierce – spierce@wakehealth.edu
Academic Nursing Program – Ms. Susan Pierce – spierce@wakehealth.edu
Physician Assistant Program – Ms. Amy Simpson – adsimpso@wakehealth.edu
Graduate School Programs – Ms. Susan Pierce – spierce@wakehealth.edu

Minority Student Scholarships
Applications for limited scholarship opportunities for minority students during the first two years of medical school are available from the National Medical Fellowships Inc. http://www.nmfonline.org/about-our-scholarships-and-awards/general-scholarships-awards/
Loans

Campus-based Loans

The Wingate Johnson Loan Fund: Established in memory of Dr. Johnson, longtime professor of medicine, acting dean of the School of Medicine, founder of the North Carolina Medical Journal, and chair of the Board of Trustees of Wake Forest University.

Other sources include the Medical Center Guild, the Robert L. McMillan Loan, the Robert Wood Johnson, the Beckmann, the Edna Langston, the W. J. Moss, and the Mary C. Powell Loan Funds. Students are also eligible to apply to the James W. Denmark Loan Fund, established in 1875 and administered through the Treasurer’s Office on the undergraduate campus.

The Office of Financial Aid assists in the preparation of applications to the North Carolina Forgivable Education Loan Program (FELS) NC residents, the William D. Ford Federal Direct Loan Programs (Direct Unsubsidized and Direct Grad PLUS loans) and alternative loan programs.

Unsubsidized Federal Direct Stafford Loan

The Unsubsidized Federal Direct Stafford Loan program is a federal student loan program that allows eligible medical students to borrow up to $47,167; the amount is dependent upon grade level. Eligible graduate and physician assistant students may borrow up to $20,500. The federal government does not pay interest. The interest rate is a variable/fixed rate. Any interest that accrues during enrollment is capitalized at repayment. Aggregate loan limits are $224,000 minus subsidized loan amounts for medical students and $138,500 minus subsidized loan amounts for physician assistant students and graduate students.

Federal Direct Grad PLUS Loan

Graduate and professional students may borrow through the Federal Direct Grad PLUS loan. Students may borrow up to the cost of education minus other financial aid. A borrower’s creditworthiness is a consideration for lender approval. The interest rate is a variable/fixed rate.

Alternative Loan Programs

Alternative loan programs are credit-based loans that may be used to supplement other forms of financial assistance. In general, alternative loans should be considered as a last resort. Not all alternative loan programs are alike. Always consult the Financial Aid Office before applying for an alternative loan

Exit Interview

Any student who has received financial aid and who ceases enrollment at Wake Forest School of Medicine for any reason—leave of absence, dismissal, withdrawal, graduation — must have an exit interview within seven days with the Financial Aid Office. This interview covers “Borrowers Rights and Responsibilities” for all student loan programs and is required by law.

Forfeit of Scholarship Funds

Students who are enrolled in a special program and have received scholarships from that program will forfeit those scholarship funds upon withdrawal or dismissal from the program.
Return of Federal Financial Aid Funds Policy

• General Policy Statement:

Students enrolled in Wake Forest School of Medicine or Wake Forest University Graduate School of Arts and Sciences who receive federal financial aid and do not complete their classes during a semester or term could be responsible for repaying a portion of the aid they received. Students who do not begin attendance must repay all financial aid disbursed for the term.

a) Scope: This policy applies to all Wake Forest School of Medicine and Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences faculty, staff, and students.

b) Responsible Department/Party/Parties:

i. Policy Owner: Director, Enrollment Services
ii. Procedure: Director, Enrollment Services
iii. Implementation: Director, Enrollment Services

• Definitions: For purposes of this Policy, the following terms and definitions apply:

a) WFBMC: Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), all on- site subsidiaries as well as those off-site governed by WFBMC policies and procedures.

b) The term “Student” is defined as a person who matriculates into, is enrolled in, or is taking courses in the Academic Nursing, the Physician Assistant (PA), or the Undergraduate Medical Education (MD) programs of Wake Forest School of Medicine or the Wake Forest University Graduate School of Arts and Sciences-Biomedical Sciences programs (hereinafter jointly referred to as “School”).

• Policy Guidelines:

a) Return of Federal Financial Aid Funds

In accordance with federal regulations, a Student who receives federal financial aid but does not complete the payment period for which that aid was awarded may not be entitled to all of the financial aid funds awarded and/or disbursed. The requirements of this policy pertaining to return of financial aid funds apply to leaves of absence as well as withdrawals and dismissals.

Federal regulations require Title IV financial aid funds to be awarded under the assumption that a Student will attend the institution for the entire period in which federal assistance was awarded. When a Student withdraws from all courses for any reason, including dismissals and leaves of absence, they may no longer be eligible for the full amount of Title IV funds that they were originally scheduled to receive. The return of funds is based upon the premise that Students earn their financial aid in proportion to the amount of time in which they are enrolled. A pro-rated schedule is used to determine the amount of federal Student aid funds they will have earned at the time of the withdrawal. Thus, a Student who withdraws in the second week of classes has earned less of his/her financial aid than a Student who withdraws in the seventh week. Once 60% of the semester is completed, a Student is considered to have earned all of his/her financial aid and will not be required to return any funds. An exception may apply for a leave of
absence. See information regarding a leave of absence, below.

The School is required to calculate how much federal financial aid a Student has earned. Based on this calculation, Students who receive federal financial aid and do not complete their classes during a semester or term could be responsible for repaying a portion of the aid they received. Students who do not begin attendance must repay all financial aid disbursed for the term.

Return of financial aid funds is determined according to the following:

i. The term “Title IV Funds” refers to the federal financial aid programs authorized under the Higher Education Act of 1965 (as amended) and for Students enrolled at the School includes the following programs: Federal Direct Unsubsidized Stafford Loans and Federal Direct Graduate PLUS Loans.

ii. The withdrawal date used in the return calculation of a Student’s federal financial aid is the actual date indicated on the official drop form. If a Student stops attending classes without notifying the School, the withdrawal date will be the midpoint of the semester or the last date of academic activity as determined by the School. Additional documentation supporting the last date of academic activity may be provided by the Student if they verify a later date of attendance than determined by the School.

iii. Determining the amount of Title IV funds to be returned:

The amount of earned and unearned financial aid is calculated on a daily basis from the first day of the payment period. The process uses calendar rather than business days. Earned aid is determined by the percentage of the number of days attended before enrollment ended divided by the total number of days in the payment period (excluding any breaks of five days or more). There are no returns after the 60% point in time, as the federal regulations view the aid has been “100% earned” after that point in time. The amount of Title IV funds to be returned is calculated by multiplying the unearned aid percentage by the total of all Title IV aid received. A copy of the worksheet used for this calculation and examples can be requested from the Financial Aid Office.

In accordance with federal regulations, the return of Title IV funds is paid in the following order:

- Unsubsidized Direct Loans
- Subsidized Direct Loans
- Federal Perkins Loans
- Direct PLUS Loans
- Other Title IV Assistance
- The Student

iv. Institutional and Student Responsibilities

- School’s responsibilities include:
  - Providing each Student with the information given in this policy
  - Review of examples of the Return of Title IV Aid and the Refund Policy with Students
  - Identifying Students who are affected by this policy
  - Completing the Return of Title IV Funds calculation for Students who are subject to the policy
  - Returning the Title IV Funds that are due the Title IV programs within 30 days of
withdrawal, dismissal, or leave.

- The Student’s responsibilities include:
  
  o Students with Federal/Title IV financial aid must notify the Financial Aid Office to discuss the implications of a status change, inclusive of withdrawal, or leave of absence, before it occurs.
  
  o Dismissed students should consult with the Financial Aid Office as directed in their dismissal paperwork. Students are also responsible for returning to the Title IV programs any funds that were disbursed directly to the Student and for with the Student was determined to be ineligible under the Return of Title IV funds calculation. The Student will also be billed for and required to pay any balance that results from a return of funds.

b) **Post-Withdrawal Disbursements**

In some cases, a Student may be eligible to receive a “post-withdrawal” disbursement after the Student withdraws when the amount of aid earned is less than the amount of aid disbursed. In such cases, the Financial Aid Office will notify the Student of the “post-withdrawal” disbursement.

c) **Leave of Absence**

Students are permitted to have one leave of absence (medical, personal, educational, administrative) within a 12-month period that does not require a return of federal financial aid funds provided that:

  i. The Student completes the requirements for formal leave of absence in accordance with the Leave of Absence policy of the Student’s program;
  
  ii. The leave of absence does not exceed 180 days in length; and
  
  iii. The leave of absence ends before the next payment period begins.

Students who are on a leave of absence as of the first day of the academic year are not eligible to receive financial aid until they return from the leave, register for classes, and begin coursework.

Students who begin a leave after the academic year begins are eligible for financial aid already disbursed but are not eligible for additional financial aid disbursements until they return from the leave of absence.

If a Student takes an approved leave of absence and then does not return from the leave within 180 days or within the payment period, the Student will be subject to the requirements for the return of federal financial aid. For the purposes of calculating earned financial aid, the last date of attendance will be retroactive to the day the leave of absence began.

4) **Review/Revision/Implementation**

   a) **Review Cycle:** This policy shall be reviewed at least every three (3) years from the effective date.

   b) **Office of Record:** After authorization, this policy will be housed in the WFBMC policy database, which shall be the office of record for this policy.

5) **Governing Law or Regulations:**
d) Higher Education Act of 1965 (as amended)
e) Student Payment Policy
f) Tuition Refund Policy

6) Revision Dates: 12/02/2015, 10/17/2019, 8/4/2020
**MD Program - Policy on Satisfactory Academic Progress (SAP) for Financial Aid Eligibility**

Federal law and regulations require Wake Forest School of Medicine (WFSM) to establish and implement a policy to measure whether students applying for and/or receiving federal financial aid are making Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established increments that lead to awarding of the degree within specified time limits. The following policy delineates the standards for Satisfactory Academic Progress at WFSM, which apply to all matriculated students, whether or not they are recipients of financial aid. Not meeting the SAP requirements may result in loss of all financial aid, federal or institutional. This policy addresses only the financial aid consequences of failing to make Satisfactory Academic Progress and does not address the consequences to academic standing or eligibility for continued enrollment. For more information about those consequences, refer to the Policy on Satisfactory Academic Progress (SAP).

The requirements for the MD degree include the satisfactory completion of the MD curriculum at WFSM. The progress of each student working toward the MD degree is monitored carefully, and the determination of Satisfactory Academic Progress is reviewed annually. At the end of each academic year, students must have demonstrated compliance with WFSM’s academic, professional and graduation requirements.

**Monitoring of Satisfactory Academic Progress**

Each student’s progress will be evaluated after grades are finalized at the end of each academic year. Evaluations of whether a student is making Satisfactory Academic Progress will be done in a timely manner; however, the next term/year, may be in progress at the time students are notified of their ineligibility. A student who fails to meet one or more of the standards for SAP (qualitative and/or time frame) is ineligible for financial aid beginning with the term immediately following the term in which the SAP requirements were not met, pending results of the appeal process. Students will be notified via their Wake Forest School of Medicine e-mail account if they have failed to meet the requirements for SAP. Students may appeal the decision. The factors used for determining whether SAP is met are explained below:

**Qualitative Measures of SAP: Reviewed at the end of each Academic Year**

Each student at WFSM is required to complete successfully all of WFSM’s required courses and identified benchmarks, gateways, clerkships, and examinations in order to graduate with the MD degree. Refer to the Policy on Satisfactory Academic Progress (SAP) for additional information regarding the standards for progression.

**Quantitative Measure & Maximum Timeframe: Reviewed at the end of each Academic Year**

The normal time frame for completion of required course work for the MD degree is 4 academic years. The maximum time permitted for completion of the MD degree is 6 years. The normal time frame for completion of required course work for the MD/PhD degree is 7 years. The maximum time permitted for completion of the MD/PhD degree is 9 years. The normal time frame for completion of the MD/MS is 6 years. The maximum time permitted for the completion of the MD/MS is 8 years.

Due to academic, administrative, medical, or personal difficulties or scholarly enrichment activities, a student may require additional time for completion of degree requirements. In such situations, an academic plan may be established for the student that departs from the normal course of study and that may require the repetition of all or a part of a year of study (i.e., subsequent to incomplete or unsatisfactory course work or an approved leave). To be making Satisfactory Academic Progress, students ordinarily must complete the first two years of the curriculum by the end of the third year after initial enrollment.

**SAP and Leaves of Absence**

A student may be granted an academic, administrative, medical, or personal leave of absence. The period of leave for which the student has been approved counts toward the published maximum time frame in which an individual student will be expected to complete all requirements of the degree program. Under extraordinary circumstances as determined by the Associate Dean for MD Program Academic Affairs, the approved leave of absence time period may be excluded from the program’s published maximum timeframe.

**Appeal Process and Financial Aid Probation**
A student who has lost eligibility for financial aid as a result of a failure to make Satisfactory Academic Progress may re-establish eligibility for financial aid only if the student subsequently meets Satisfactory Academic Progress requirements or successfully appeals the decision that SAP has not been met.

Students who lose eligibility for financial aid may appeal the decision regarding SAP by following the procedures below. Those wishing to utilize this process must present evidence of mitigating circumstances that occurred during the course of the semester in question that could not have been anticipated prior to that period and that adversely affected their ability to make Satisfactory Academic Progress. Events such as the death of an immediate family member, extended illness suffered by the student, or other unforeseeable events that may have caused significant hardship for the student may be considered as examples of mitigating circumstances.

To appeal, the student must:
- Submit a letter of appeal to the Financial Aid Office.
- The appeal letter should include the following:
  - Mitigating circumstances that prevented the student from meeting the requirements for SAP
  - Documentation that supports the student’s basis for appeal
  - Steps the student has taken/will take to ensure future SAP. This plan should outline the student's academic goals for each period that will enable the student to meet the requirements for SAP at a specified future point in time
  - Anticipated graduation date

In most cases, the SAP Appeals Committee (as defined by the Dean) will render a decision within two weeks of receipt of a fully completed appeal. All decisions of the SAP Appeals Committee are final. Notification of the decision will be sent to the student via the student’s WFSM e-mail account.

If the appeal is approved, the student will be placed on financial aid probation and will be eligible for financial aid as long as an approved Academic Plan is in place. An Academic Plan must be formulated with the Offices of Academic Affairs and Student Services, in consultation with the Registrar and student. The Academic Plan will typically be developed to encompass 1 academic year. Academic progress will be evaluated at the conclusion of each enrolled term for students on financial aid probation.

Students who meet the requirements for SAP during their probationary semester will resume financial aid good standing and again be evaluated at the conclusion of the following academic year.

Students who fail to meet the requirements for SAP during the probationary semester or do not complete the requirements of their academic plan will again be ineligible for financial aid. Students may appeal again by following the appeal process.

If the SAP appeal is denied, financial aid will be cancelled.

Students who are ineligible to receive financial aid may use one or more of the following payment options while attempting to regain eligibility: student/family resources or Alternative/Private Educational Loans.

Note: A student who has lost eligibility for financial aid due to a failure to make SAP cannot automatically regain eligibility by paying tuition for a semester or by sitting out a term. Eligibility may be regained only by eliminating all SAP deficiencies at the student’s expense until all requirements of this policy are met. Students who have reached their maximum time frame are not able to regain eligibility. Students who are withdrawn from WFSM are not making Satisfactory Academic Progress and are not eligible to receive financial aid.

Enforcement: The Offices of the Registrar, Academic Affairs, Financial Aid, and the Student Professionalism and Academic Review Committee (SPARC) collaboratively shall have the responsibility for monitoring and enforcing standards for Satisfactory Academic Progress. The WFSM Registrar will notify SPARC annually of any students who are not meeting the requirements for Satisfactory Academic Progress. SPARC will determine whether academic or other sanctions are warranted and will inform the student of such sanctions. The Financial Aid Office will inform any student whose financial aid has been impacted.
**Graduate School of Arts and Science – Biomedical Science - Policy on Satisfactory Academic Progress for Financial Aid Eligibility**

To determine continuing financial aid eligibility, the financial aid committee evaluates students’ satisfactory academic progress at the end of each semester. The receipt of federally-controlled aid requires half-time enrollment (4.5 or more hours on the Reynolda Campus and 4.0 or more hours on the Bowman Gray Campus) in a degree seeking program during the fall and spring semesters and a minimum cumulative grade point average of 2.5 on work attempted in the Wake Forest University Graduate School of Arts and Sciences. Certain programs have higher academic requirements, which are communicated directly to the students by the departments. The Dean may revoke institutionally-controlled financial aid for violation of University regulations, including its honor code, or for violation of federal, state, or local laws.

**FEDERAL FINANCIAL AID**

The Higher Education Act mandates that institutions of higher education establish minimum standards of satisfactory academic progress for students receiving federal aid. Wake Forest University makes these minimum standards applicable to all programs funded by the federal government. Certain federal aid programs have higher academic and/or other requirements, which are communicated to recipients. To maintain academic eligibility for federal aid, a student must:

- Complete the requirements for a master's degree or a Doctor of Philosophy degree in the maximum time frame as defined in the Wake Forest Graduate School of Arts and Science Bulletin section ‘Requirements for Degrees’ for his/her program. A student becomes ineligible for aid at the point it is determined that he/she can no longer complete degree requirements within the remaining maximum time frame.
- Maintain a minimum 2.5 cumulative grade point average on all graded hours attempted
  - Incompletes count as hours attempted, unless from a non-credit course.
  - Audited classes do not count as hours attempted.
  - The grade point average calculation excludes satisfactory/unsatisfactory and pass/fail courses.
  - In cases where a student repeats a course for which he or she received a grade of B- or lower, the cumulative grade point average is calculated by considering the course as attempted only once, with the grade points assigned reflecting the highest grade received. However, this provision does not apply to any course for which the student has received the grade of F in consequence of an honor code violation.
  - During a semester in which a student drops courses or withdraws, all graded hours attempted in the Graduate School of Arts and Sciences include those graded hours attempted before (1) the withdrawal date, or (2) the last day to drop a course without penalty (as published in the academic calendar).
- Maintain a grade of Satisfactory “S” in research courses. Adequate progress is determined by the standards of the department or program in which the student is enrolled.

The policy on satisfactory academic progress applies only to the general eligibility for aid consideration. There are other federally-mandated requirements a student must meet to receive federal aid. For instance, certain federal loan programs also require either the passage of a period of time or the advancing of a grade level between annual maximum borrowing, regardless of general eligibility for aid. Other general student eligibility requirements for a student to receive federal financial aid are listed in Funding Your Education: The Guide to Federal Student Aid, a publication of the U.S. Department of Education.

A student who is not making satisfactory academic progress due to one of the reasons outlined above will be placed on probation by the Graduate School of Arts and Sciences. Students placed on academic probation will be notified in writing, along with the Track/Program Director and will be given one semester to resume satisfactory academic standing.

During the probationary period, students will be placed on financial aid warning for one semester and remain eligible to receive federal and institutional assistance during that semester (except when they have exceeded their degree deadline). At the end of the probationary period, progress will be reviewed. If a student cannot re-establish...
satisfactory academic standing during the probationary semester, the student will become ineligible to receive financial aid and may be dismissed or withdrawn from the Graduate School.

**APPEAL PROCEDURE – Bowman Gray Campus**

*Denial of aid* under this policy may be **appealed in writing** to the Dean of the Graduate School and mailed to Medical Center Boulevard, WS, NC 27157.

The Dean may grant a **probationary reinstatement** of one semester to any student, upon demonstration of extenuating circumstances documented in writing to the satisfaction of the committee. Examples of extenuating circumstances and appropriate documentation include, but are not necessarily limited to the following: illness of the student or immediate family members – statement from physician that illness interfered with opportunity for satisfactory progress; death in family – statement of student or minister; temporary or permanent disability – statement from physician. During a probationary period, students are considered to be making satisfactory academic progress under this policy and may continue to receive aid. A determination of satisfactory academic progress for any period of enrollment after the probationary period is made at the end of the probationary period. **Reinstatement** after probation can be made only after the student has received credit for the appropriate percentage of work attempted with the required cumulative grade point average.
Physician Assistant Program - Satisfactory Academic Progress for Financial Aid Eligibility Policy

1) General Policy Statement:

It is the policy of the Wake Forest PA Program to carefully monitor the progress of each student working toward the MMS degree and to make a determination on each student’s Satisfactory Academic Progress at the end of each unit of study.

a) Scope: All Wake Forest PA Program students are responsible for complying with this policy.

b) Responsible Department/Party/Parties:

   i. Policy Owner: PA Program Policy Committee
   ii. Procedure: The PA Program Policy Committee
   iii. Supervision: The PA Program Director
   iv. Implementation: The PA Program Director

2) Definitions: For purposes of this Policy, the following terms and definitions apply:

   a) WFBMC: Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), all onsite subsidiaries as well as those off-site governed by WFBMC policies and procedures.

   b) Policy: As defined in the Policy on Creating and Amending Policy, a statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities of WFBMC. A policy may help to ensure compliance with applicable laws and regulations, promote one or more of the missions of WFBMC, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

3) Policy Guidelines:

Wake Forest School of Medicine (WFSM) is required by federal law and regulation to establish and implement a policy to measure whether students applying for and/or receiving federal financial aid are making Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established increments that lead to awarding of the degree within specified time limits. The following policy delineates the standards for Satisfactory Academic Progress at WFSM, which apply to all matriculated students, whether or not they are recipients of financial aid. Not meeting the SAP requirements may result in loss of all financial aid, federal or institutional. This policy addresses only the financial aid consequences of failing to make Satisfactory Academic Progress and does not address the consequences to academic standing or eligibility for continued enrollment.

The requirements for the MMS degree from the PA Program include the satisfactory completion of the PA curriculum at WFSM. The progress of each student working toward the MMS degree is monitored carefully, and the determination of SAP is reviewed at the end of each unit of study by the Student Progress Committee and PA Program Director. At the end of each academic year, students must have demonstrated compliance with the PA Program’s academic, professional and graduation requirements.

a) Monitoring of Satisfactory Academic Progress.

   i. Each student’s progress will be evaluated after grades are finalized at the end of each unit of study. Evaluations of whether a student is making SAP will be done in a timely manner; students will not proceed to the next unit of study if they are not in good academic standing. A student who fails to meet one or more of the standards for SAP (qualitative and/or time frame) is ineligible for
financial aid beginning with the term immediately following the term in which the SAP requirements were not met, pending results of the appeal process. Students will be notified via their Wake Forest School of Medicine e-mail account if they have failed to meet the requirements for SAP. Students may appeal the decision.

b) Qualitative Measures of SAP: Reviewed at the end of each Academic Year.

ii. Each PA student at WFSM is required to complete successfully all of WFSM’s required courses and identified benchmarks, rotations, and examinations in order to graduate with the MMS degree from the PA Program. The WFSM PA Program measures academic progress with grades of Honors, Competent, Concern and Failure, rather than a cumulative grade point average. (Refer to the Student Progress Policy in the PA Student Handbook.)

c) Quantitative Measure & Maximum Timeframe: Reviewed at the end of each Academic Year.

iii. The normal time frame for completion of required course work for the MMS degree is two academic years. The maximum time frame is three years. Some students may apply and be approved for dual enrollment in more than one academic program offered by Wake Forest University. Based on the specific program of interest, a maximum time permitted for completion of all course content will be published to the student prior to matriculation. iv. Due to academic, administrative, medical, or personal difficulties or scholarly enrichment activities, a student may require additional time for completion of degree requirements. In such situations, an academic plan may be established for the student that departs from the normal course of study and that may require the repetition of all or a part of a year of study (i.e., subsequent to incomplete or unsatisfactory course work or an approved leave).

d) SAP and Leaves of Absence.

i. A student may be granted an academic, administrative, medical, or personal leave of absence for a variety of reasons, or a student may be granted a leave to pursue other scholarly enrichment activities. The period of leave for which the student has been approved may be excluded from the maximum time frame in which an individual student will be expected to complete all requirements of the degree program. A leave of absence should not extend training for more than one year.


i. A student who has lost eligibility for financial aid as a result of a failure to make SAP may re-establish eligibility for financial aid only if the student subsequently meets SAP requirements or successfully appeals the decision that SAP has not been met.

ii. Students who lose eligibility for financial aid may appeal the decision regarding SAP by following the procedures below. Those wishing to utilize this process must present evidence of mitigating circumstances that occurred during the course of the unit of study or clinical rotation in question, that could not have been anticipated prior to that period, and that adversely affected their ability to make SAP. (Events such as the death of an immediate family member, extended illness suffered by the student, or other unforeseeable events that may have caused significant hardship for the student may be considered as examples of mitigating circumstances.) To appeal, the student must submit a letter of appeal to the Financial Aid Office. The appeal letter should include the following:

• Mitigating circumstances that prevented the student from meeting the requirements for SAP;

• Documentation that supports the student’s basis for appeal;

• Steps the student has taken/will take to ensure future SAP. This plan should outline the student’s academic goals for each period that will enable the student to meet the requirements for SAP at a specified future point in time;
• Anticipated graduation date.

iii. In most cases, the PA Program Director, in conjunction with the Financial Aid Office, will render a decision within two weeks of receipt of a fully completed appeal. Notification of the decision will be sent to the student via the student’s WFSM e-mail account.

iv. If the appeal is approved, the student will be placed on financial aid probation and will be eligible for financial aid as long as an approved Academic Plan is in place. An Academic Plan must be formulated with the PA Program Director or designee in consultation with the Registrar and student. The Academic Plan will be developed to ensure, if followed, the student will be able to meet the requirements for SAP by a designated point in time. Academic progress will be evaluated at the conclusion of each enrolled term for students on financial aid probation.

v. Students who meet the requirements for SAP during a defined period of probation will resume financial aid good standing and again be evaluated at the conclusion of the following academic period.

vi. Students who fail to meet the requirements for SAP during a defined period of probation or who do not complete the requirements of their academic plan will again be ineligible for financial aid. Students may appeal again by following the appeal process.

vii. If the SAP appeal is denied, financial aid will be cancelled.

viii. Students who are ineligible to receive financial aid may use one or more of the following payment options while attempting to regain eligibility: student/family resources or alternative/private educational loans.

Note: A student who has lost eligibility for financial aid due to a failure to make SAP cannot automatically regain eligibility by paying tuition or by sitting out for a semester. Eligibility may be regained only by eliminating all SAP deficiencies at the student’s expense until all requirements of this policy are met. Students who are withdrawn from WFSM are not making Satisfactory Academic Progress and are not eligible to receive financial aid.

f) Enforcement.

i. The Office of the Registrar, Financial Aid, the PA Program Director and the PA Student Progress Committee collaboratively shall have the responsibility for monitoring and enforcing standards for SAP. The WFSM PA Registrar will notify the PA Student Progress Committee at the end of each unit of study or clinical rotation of any students who are not meeting the requirements for SAP. The Student Progress Committee will determine whether academic or other sanctions are warranted and will inform the student of such sanctions. The Financial Aid Office will inform any student whose financial aid has been impacted.

4) Review/Revision/Implementation

a) Review Cycle: This policy shall be reviewed by the PA Program Policy Committee at least every three (3) years from the effective date.

b) Office of Record: After authorization, the Legal Department shall house this policy in a policy database and shall be the office of record for this policy. The PA Program will also house this policy in its policy database.

8) Revision Date: April 13, 2020
Federal law and regulations require Wake Forest School of Medicine (WFSM) to establish and implement a policy to measure whether students applying for and/or receiving federal financial aid are making Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established increments that lead to awarding of the degree within specified time limits. The following policy delineates the standards for Satisfactory Academic Progress at WFBH/WFSM NAP, which applies to all matriculated students, whether or not they are recipients of financial aid. Failure to meet the SAP requirements may result in a student’s loss of all financial aid, including federal and institutional. This policy addresses only the financial aid consequences of failing to achieve Satisfactory Academic Progress, and does not address the consequences to academic standing or eligibility for continued enrollment. For more information about those consequences, see the Academic and Professional Guidelines, and Standards for Progression.

The requirements for the Masters of Science Degree in Nurse Anesthesia (MSNA) include satisfactory achievement of performance objectives of the MSNA curriculum. The progress of each student working toward the MSNA degree is monitored carefully, and the determination of Satisfactory Academic Progress is reviewed each semester. At the end of each academic semester, students must have demonstrated compliance with WFBH/WFSM NAP clinical, academic, professional, and graduation requirements.

**Monitoring of Satisfactory Academic Progress**

Each student’s progress will be evaluated after grades are finalized at the end of each academic semester. Evaluations of students’ Satisfactory Academic Progress will be completed in a timely manner, however the subsequent term/year, may be in progress at the time students are notified of their ineligibility. A student who fails to meet one or more of the standards for SAP is ineligible for financial aid beginning with the academic term immediately following the term in which the SAP requirements were not met, pending results of the appeal process. Students will be notified via their WFBH e-mail account if they have failed to meet the requirements for SAP. Students may appeal the decision.

The factors determining whether SAP is achieved are explained below:

**Qualitative Measures of SAP: Reviewed at the end of each Semester**

Each student at WFBH/WFSM NAP is required to successfully complete all of WFSM MSNA required courses and minimum clinical case requirements in order to graduate with the MSNA degree. Refer to Honor Policy, Academic and Professional Guidelines, Standards for Progression in the Nurse Anesthesia Program Student Handbook for additional information regarding the standards for progression.

**Quantitative Measure & Maximum Timeframe: Reviewed at the end of each Semester**

The normal time frame for completion of required course work for the MSNA degree is 2 academic years. The maximum time permitted for completion of the MSNA degree is 3 academic years.

Other graduation criteria include satisfactory completion of all clinical rotations in the program, payment of all fees and satisfactory completion of a comprehensive examination in the final semester of the program. Criteria for progression include:

- maintaining a “B” average in cumulative academic coursework.
- achieving no more than 6 credit hours cumulatively of grades below B.
- maintaining a passing grade in each clinical course.

Due to academic, administrative, medical or personal difficulties or scholarly enrichment activities, a student may require additional time for completion of degree requirements. In such situations, an academic plan may be established for the student that departs from the normal course of study and that may require additional time extending the educational period and the repetition of all or a part of a year of study (i.e., subsequent to incomplete or unsatisfactory course work or an approved leave). To be making Satisfactory Academic Progress, students must complete the first two years of the curriculum by the end of the third year after initial enrollment.
SAP Appeal and Financial Aid Eligibility

A student who has lost eligibility for financial aid as a result of a failure to make Satisfactory Academic Progress (SAP) may re-establish eligibility for financial aid only if the student subsequently meets SAP requirements or successfully appeals the decision that SAP has not been met.

Students who lose eligibility for financial aid may appeal the decision regarding SAP by following the procedures below. Those wishing to utilize this process must present evidence of mitigating circumstances that occurred during the course of the semester in question that could not have been anticipated prior to that period and that adversely affected their ability to make SAP. Events such as the death of an immediate family member, extended illness suffered by the student, or other unforeseeable events that may have caused significant hardship for the student may be considered as examples of mitigating circumstances.

To appeal, the student must submit letters of appeal to the WFSM Academic Appeals Committee and the Financial Aid Office. These letters of appeal should include the following:

- Mitigating circumstances that prevented the student from meeting the requirements for SAP
- Documentation that supports the student’s basis for appeal
- Steps the student has taken/will take to ensure future SAP. This plan should outline the student’s academic goals for each period that will enable the student to meet the requirements for SAP at a specified future point in time
- Anticipated graduation date

In most cases, the WFSM Academic Appeals Committee will render a decision within two weeks of receipt of a fully completed appeal. All decisions of the WFSM Academic Appeals Committee are final. Notification of the decision will be sent to the student via the student’s WFBH e-mail account.

If the appeal is approved, the student will be placed on financial aid probation and will be eligible for financial aid as long as an approved Academic Plan is in place. An Academic Plan must be formulated with the NAP Student Progress Committee, in consultation with the Registrar and student. The Academic Plan will typically be developed to encompass one academic semester. Academic progress will be evaluated at the conclusion of each enrolled term for students on financial aid probation.

Students who meet the requirements for SAP during their probationary semester will resume financial aid good standing and again be evaluated at the conclusion of the following academic year. Students who fail to meet the requirements for SAP during the probationary semester or do not complete the requirements of their Academic Plan will again be ineligible for financial aid. Students may appeal again by following the appeal process.

If the SAP appeal is denied, financial aid will be cancelled.

Students who are ineligible to receive financial aid may use one or more of the following payment options while attempting to regain eligibility: student/family resources or Alternative/Private Educational Loans.

Note: A student who has lost eligibility for financial aid due to a failure to make SAP cannot automatically regain eligibility by paying tuition for a semester or by sitting out a term. Eligibility may be regained only by eliminating all SAP deficiencies at the student’s expense until all requirements of this policy are met. Students who have reached their maximum time frame are not able to regain eligibility. Students who are withdrawn from WFSM are not making SAP and are not eligible to receive financial aid.

Enforcement

The NAP Student Progress Committee, Office of Financial Aid and the Offices of the WFSM Registrar collaboratively shall have the responsibility for monitoring and enforcing standards for Satisfactory Academic Progress. The WFSM Registrar will notify the NAP Student Progress Committee annually of any students who are not meeting the requirements for Satisfactory Academic Progress. The NAP Student Progress Committee will determine whether academic or other sanctions are warranted and will inform the student of such sanctions. The Financial Aid Office will inform any student whose financial aid has been impacted.
Doctor of Nursing Practice – Satisfactory Academic Progress for Financial Aid Eligibility

Federal law and regulations require Wake Forest School of Medicine (WFSM) to establish and implement a policy to measure whether students applying for and/or receiving federal financial aid are making Satisfactory Academic Progress (SAP). SAP is the successful completion of degree requirements according to established increments that lead to awarding of the degree within specified time limits. The following policy delineates the standards for Satisfactory Academic Progress (SAP) at WFSM Post-Master’s DNP, which applies to all matriculated students, whether or not they are recipients of financial aid. Failure to meet the SAP requirements may result in a student’s loss of all financial aid, including federal and institutional. This policy addresses only the financial aid consequences of failing to achieve SAP and does not address the consequences to academic standing or eligibility for continued enrollment. For more information about those consequences, see the section in this handbook titled Academic Honor Policy and Standards of Professional Conduct.

Qualitative Measures of SAP: Reviewed at the end of each Semester
The requirements for the Post-Masters DNP include satisfactory achievement of performance objectives of the DNP curriculum. Formative and summative evaluation of academic progress occur throughout the program. The progress of each student working toward the DNP degree is monitored carefully, and the determination of Satisfactory Academic Progress (SAP) is reviewed each semester by the Academic Nursing faculty and the WFSM registrar. At the end of each academic semester, students must have demonstrated compliance with WFSM academic, professional, and graduation requirements.

The curriculum is set up in a lock step manner. Cohorts will begin and complete the program of study together. In extenuating circumstances, with approval by the program director and the associate director for doctoral education, students will be given up to three extra years to complete their program of study for a maximum of five years for the post master’s DNP, including LOA.

Quantitative Measures of SAP: Reviewed at the end of each Semester
Students are expected to maintain an overall grade point average (GPA) of 3.0. However, up to 4 credit hours may be below a “B” average during the completion of the program. The final grade given by the course director will be reported to the registrar.

Financial Aid Appeal

A student who has lost eligibility for financial aid because of a failure to make Satisfactory Academic Progress (SAP) may re-establish eligibility for financial aid only if the student subsequently meets SAP requirements or successfully appeals the decision that SAP has not been met.

Students who lose eligibility for financial aid may appeal the decision regarding SAP by following the procedures below. Those wishing to utilize this process must present evidence of mitigating circumstances that occurred during the semester in question that could not have been anticipated prior to that period and that adversely affected their ability to make SAP. Events such as the death of an immediate family member, extended illness suffered by the student, or other unforeseeable events that may have caused significant hardship for the student may be considered as examples of mitigating circumstances.

To appeal, the student must submit letters of appeal to the Financial Aid Office. These letters of appeal should include the following:

- Mitigating circumstances that prevented the student from meeting the requirements for SAP
- Documentation that supports the student’s basis for appeal
- Steps the student has taken/will take to ensure future SAP. This plan should outline the student’s academic goals for each period that will enable the student to meet the requirements for SAP at a specified future point in time
- Anticipated graduation date

In most cases, the WFSM SAP for Financial Aid Committee will render a decision within two weeks of receipt of a fully completed appeal. All decisions of the WFSM SAP for Financial Aid Committee are final. Notification of the decision will be sent to the student via the student’s WFSM e-mail account.
If the appeal is approved, the student will be placed on financial aid probation and will be eligible for financial aid as long as an approved Academic Plan is in place. An Academic Plan must be formulated with the Academic Nursing Student Progress Committee in consultation with the Registrar and student. The Academic Plan will typically be developed to encompass one academic semester. Academic progress will be evaluated at the conclusion of each enrolled term for students on financial aid probation.

Students who meet the requirements for SAP during their probationary semester will resume financial aid good standing and again be evaluated at the conclusion of the following academic year. Students who fail to meet the requirements for SAP during the probationary semester or do not complete the requirements of their Academic Plan will again be ineligible for financial aid. Students may appeal again by following the appeal process.

If the SAP appeal is denied, financial aid will be cancelled.

Students who are ineligible to receive financial aid may use one or more of the following payment options while attempting to regain eligibility: student/family resources or Alternative/Private Educational Loans.

Note: A student who has lost eligibility for financial aid due to a failure to make SAP cannot automatically regain eligibility by paying tuition for a semester or by sitting out a term. Eligibility may be regained only by eliminating all SAP deficiencies at the student’s expense until all requirements of this policy are met. Students who have reached their maximum time frame are not able to regain eligibility. Students who are withdrawn from WFSM are not making SAP and are not eligible to receive financial aid.

Monitoring and Enforcement of Satisfactory Academic Progress

The progress of each student working toward the DNP degree is monitored carefully, and the determination of SAP is reviewed each semester. Each student’s progress will be evaluated after grades are finalized at the end of each academic semester. Evaluations of students’ SAP will be completed in a timely manner, however the subsequent term/year, may be in progress at the time students are notified of their ineligibility. A student who fails to meet one or more of the standards for SAP is ineligible for financial aid beginning with the academic term immediately following the term in which the SAP requirements were not met, pending results of the appeal process. Students will be notified via their WFSM e-mail account if they have failed to meet the requirements for SAP. Students may appeal the decision. The DNP program director and the Office of Financial Aid and the Offices of the WFSM Registrar collaboratively shall have the responsibility for monitoring and enforcing standards for SAP. At the end of each semester the WFSM Registrar will notify the DNP program director of any students who are not meeting the requirements for SAP. The program director will determine whether academic or other sanctions are warranted and will inform the student of such sanctions. The Financial Aid Office will inform any student whose financial aid has been impacted.
**Student Payment Policy**

**PURPOSE**
The purpose of this policy is to maintain records of student charges and to collect those charges in a timely manner.

**SCOPE**
This policy applies to:

A. All Wake Forest University Health Sciences/School of Medicine students - inclusive of the Physician Assistant (PA), Nurse Anesthesia (CRNA), Doctor of Nursing Practice (DNP), Doctor of Medicine (MD), and Biomedical Graduate Programs (MS/MHL/PhD) programs - are responsible for complying with this policy.

B. All Wake Forest University Health Sciences/School of Medicine employees, including contract employees/entities, faculty, and staff are responsible for complying with this policy.

C. Responsible Departments/Parties:
   1. Policy Owner: Bursar
   2. Procedure/Implementation: Bursar
   3. Supervision: Academic Accounting, Financial Services Director of Financial Aid and Student Records, Assistant Dean of Academic Finances

**DEFINITIONS**

*Policy*: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

**GUIDELINES**

Wake Forest University Health Sciences/School of Medicine will maintain records of all student charges (including tuition, fees, student health insurance, and any other miscellaneous charges) for a period of seven years after each student leaves (graduates or withdraws from) the institution. Each educational program follows different term schedules throughout the academic year for tuition/fees. These dates are published on the intranet and internet.

A. Tuition and fees are assessed on financial aid disbursement dates for each respective academic term. Aid disbursement and related charges mark the beginning of the payment period. Payments are due on or before the 10th calendar day following the start of the payment period for each term.

B. If payments are not received within 30 days from the beginning of the payment period and the student is not expecting tuition funds from a third-party source (government, VA, scholarship, etc.), the Bursar will charge a late fee of $100. A late fee of $100 will be charged every 30 days until the balance is paid in full.

C. Before registration opens for the next term, the Bursar will report students with unpaid balances to Program Directors for administrative action. Students will not be eligible to advance in the curriculum until the outstanding balance and late fees are paid in full.

D. Students will not be eligible to receive their diploma or academic transcripts until the outstanding balance is paid in full.

E. If a student withdraws, does not return from a leave of absence, or is administratively terminated and owes an outstanding balance, the Bursar will contact the student to arrange payment in full or monthly installments. If the former student fails to make the agreed-upon payments, his/her delinquent account will be turned over to a collection agency. Once referred, the account will no longer be held by WFUHS and the student must direct all inquiries and payments to the collection agency.

**REVISION DATES** April 8, 2021
**Student-Focused Resources**

❖ **Office of Student Records**

The Office of Student Records is a steward of student records, handling all records from admissions through matriculation to the conferral of the degree. This office offers a wide range of services to students and graduates in various areas of academic records, student status, official verification for licensure, transcript requests, and various certifications.

❖ **Office of Student Affairs**

The Office of Student Affairs supports individual students and student groups across all educational programs throughout their time at the Wake Forest School of Medicine. Student Affairs is primarily responsible for all large-scale events, the learning environment, oversight of all student groups, and educational support programs for academic and career advising, as well as educator development. In conjunction with the Learning Communities (Houses), Student Inclusion & Diversity, and Student Wellness, the Office of Student Affairs strives to achieve the following vision, mission, and goals:

**Vision:** Engaged, empowered, and cared for learners become engaging, empowering, and caring health care professionals and scientists.

**Mission:** To support a challenging yet nurturing learning environment that produces innovative and ethical health care professionals, and scientists equipped to provide exemplary patient care and research findings to lead medicine and translational science into the 21st century.

**Goals:**

1. Foster learner development as professionals by helping learners achieve academic success, guiding learners through their career pursuits, and promoting wellness of the whole learner (intellectual, physical, emotional, and spiritual)
2. Support a learning community that is free of mistreatment and embodies the principles of integrity, diversity, inclusion, and mutual respect
3. Cultivate a culture of inclusion for the student body through the recruitment and retention of exceptional diverse learners
4. Maintain pathways to careers in medicine and science for all learners
Office of Student Inclusion and Diversity (SID)

Wake Forest School of Medicine is a learning healthcare system that practices inclusive excellence to improve health. Wake Forest has a strong institutional commitment to increase diversity in its training programs by recruiting a diverse student body that fosters a welcoming and stimulating environment.

The mission of the Office of Student Inclusion and Diversity (SID) is to demonstrate a strong institutional commitment to diversity and inclusion with belonging, respect, value, engagement, and connection throughout the institution and our community. SID focuses on supporting the educational mission of the medical school and its goal of excellence through inclusive and diverse measures, with the following goals:

- Pipeline – talent identification and development designed to prepare and attract diverse learners into the health professions
- Recruitment – recruit a diverse learner population
- Retention – create an inclusive environment that values all learners and experiences

SID programs and activities include short-term objectives such as assisting the Office of Admissions with recruiting and the Office of Student Affairs with retention of learners from diverse backgrounds. The long-range objectives focus on medical career awareness and preparation of underrepresented, disadvantaged, and non-traditional learners. In addition, SID assists the Office of Student Affairs with efforts to provide an inclusive and culturally sensitive learning environment.

Below are some programming and groups that the Office of Inclusion and Diversity supports in the pursuit of our goals, mission, and vision:

**Diversity-focused student groups:**
- Student National Medical Association (SNMA)
- Latino Medical Student Association (LMSA)
- American Medical Women Association (AMWA)
- Sexual Health Awareness Group (SHAG)
- Safe Zone in Medicine
- Cultural Awareness Council
- WF Jewish Medical Student Group
- Mentoring the Pipeline (MTP)

**Examples of programming and Events by our office and student groups include the following:**
- African American/Black Affinity Group
- American Indian Heritage Month Dancing and Drumming
- Art of A Cure Silent Auction
- Black History Month Celebration & Events
- College Launch programming for high school students
- Diwali Dinner
- Eid Celebration & Iftar Feast
- Global Diversi-TEA – sample of teas from around the world International Dance Festival
- SNMA Medical Excellence Banquet
- Mentoring the Pipeline Mock Interviews
- Pre-Health Conference
- Sickle Cell Toy Drive
- Non-profit summer pipeline camps for high school & college students
- Wake Up Winston Open Mic Night

Contact Student Inclusion and Diversity:
Phone: 336-716-4201
Email: sid@wakehealth.edu
Website: [https://school.wakehealth.edu/Education-and-Training/Student-Affairs/Diversity-and-Inclusion](https://school.wakehealth.edu/Education-and-Training/Student-Affairs/Diversity-and-Inclusion)
**Location:** We are located on the 1\textsuperscript{st} floor of the Bowman Gray Center for Medical Education in Suite 130

**Resources for Academic Assistance**

In the event of academic difficulty in a particular course or clerkship, or more general problems of academic performance, students are advised to first consult with the faculty director of the course(s), clerkship(s), or block in question. Additionally, students may request academic support to improve or enhance their study, learning, and test-taking skills by contacting The Office of Academic Excellence and Support. An additional resource may be the Assistant Dean for Teaching, Learning, and Engagement in the Office of Student Affairs.

**Participation in Peer Assisted Learning (PAL).**

Wake Forest School of Medicine strongly supports a collaborative and inclusive learning environment. As such, students are encouraged to participate in our PAL program by becoming a tutor or benefiting from peer tutoring. Application forms requesting tutoring assistance or services may be found on our Advising page.

([https://school.wakehealth.edu/Education-and-Training/Student-Affairs/Advising](https://school.wakehealth.edu/Education-and-Training/Student-Affairs/Advising)).

**Resources for Personal Assistance**

**Personal Assistance  Professional**

**Counselors**

The following are available to provide counseling or referral for transient or long-term personal or mental health issues that interfere with academic performance or well-being:

Paige Bentley, PhD, LPCS, BCC, SEP, RYT  
Director, Student Counseling & Well-Being Services, 336-713-3357

Ryan MacLeod, MA, LMFT  
Senior Mental Health Counselor, Training Coordinator, 336-713-6302

Orita Ramseur, MA/Mdiv, LPC  
Mental Health Counselor, Outreach Coordinator, 336-713-9725

Marcia McCall, PhD, MBA, LPCA  
Part-Time Mental Health Counselor

**Student Counseling & Well-Being Services**

Health care education can be stressful and demanding, with many competing commitments. Resilience and the ability to balance commitments to oneself, others, and the larger educational and professional context are key developmental capacities for adapting and thriving during this time of continuous learning and growth. Many learners find that participating in well-being activities, making connections with other learners, and seeking the support of counseling and learning professionals can enhance their ability to thrive in this intense and highly demanding environment.

It is with this awareness that the mission of Counseling & Well-Being Services (CAWS) was developed. Our mission is to support and promote the emotional, intellectual, physical, social, and spiritual well-being of students on our campus through providing well-being activities and counseling.

CAWS provides confidential and free counseling, coaching, and well-being consultation sessions for learners. Learners make appointments directly with a therapist, and all information with respect to who is attending, as well as the content of the process, is confidential.
Services: Information on Counseling & Well-Being Services, including all activities, is listed in the medical student calendar and newsletter as well as on our website (www.wakehealth.edu/student-wellness/). CAWS activities are developed in concordance with student interest and availability, so please feel free to make requests and provide feedback.

Counseling and Well-being Coaching/Consultation are offered for individuals, couples, and small groups. Group Well-being Activities (Examples)

- Mindfulness Meditation
- Yoga
- Pet Therapy
- Coffee Café
- Adulting 101

Hours: Appointments are available Monday-Friday between the hours of 8am – 5pm, and last 45-50 minutes long, depending on needs. Well-being activities are held during a variety of times to accommodate learner schedules.

Location: We are located on the 1st floor of the Bowman Gray Center for Medical Education. Our waiting room is BGCME 1213.

Scheduling: Contact us at our confidential email at counselingservices@wakehealth.edu or click on the link on the website to complete a confidential, online appointment request form. (www.wakehealth.edu/student-wellness/)

Learning Environment Liaison (Formerly Student Advocate)
The Learning Environment Liaison serves as a central resource for reporting mistreatment or unprofessional behavior in the learning environment for all WFSM learners (MD, Graduate, PA, and Academic Nursing), as well as for visiting students, non-WFSM clinical students, and non-affiliated student interns.

Students may report a mistreatment or professionalism concern to the Office of Student Affairs through the following avenues:

- Via online reporting form in Service Now (accessible on your desktop or by using the following link: https://wakehealth.service-now.com/aclab)
- Via phone at
  Sarah Riney, 336-713-3352
  Dr. Stacy Schmauss, 336-713-7858
- Via email at
  Sarah Riney, sriney@wakehealth.edu
  Dr. Stacy Schmauss, sschmaus@wakehealth.edu
- In person at Bowman Gray Center for Medical Education, 1st floor,
  Sarah Riney, Office 1327
  Dr. Stacy Schmauss, Office 1312

Innovation Quarter Chaplain
The Innovation Quarter is promoting innovation in Spiritual Care. Wake Forest School of Medicine, the Innovation Quarter, Wake Forest University Chaplain’s office, and chaplaincy department of WFBH Faith Health, are co-sponsoring a Manager of Spiritual Care Services for the Innovation Quarter. Chaplain Michelle Nicolle, PhD, BCC, completed a CPE residency at WFBH in August 2016. Prior to this residency, Dr. Nicolle ran a research program, with offices and a lab in the Innovation Quarter. Michelle is a graduate of the Upaya Buddhist Chaplaincy training program in Santa Fe, NM and was ordained as lay Buddhist minister in 2016. She was board certified by the Association of
Professional Chaplains in 2018. In October of 2019, Michelle became a novice priest in the Soto Zen tradition, so you might see her sporting a bald head. Specializing in healthcare chaplaincy and crisis response, Michelle’s role will be to provide spiritual care and support for MD, PA, Academic Nursing, and Graduate students, faculty and staff for WFSM, as well as WFU “Wake Downtown”. Michelle is ready to respond to crisis and care for the many businesses and scientists associated with the Innovation Quarter. Michelle’s office is located on the 3rd floor of the Bowman Gray Center for Medical Education, Office 3109. Michelle can be reached by phone at (336) 713-9766 or by email at mnicolle@wakehealth.edu

Student Health Services

Employee Health
The following Student Health services are available at the Medical Center Employee Health Services Clinic on a walk-in basis Monday through Friday from 7:00 am until 5:00 pm:

- Annual compliance requirements such as the flu vaccine, as well as maintenance of immunization records;
- All human or animal blood and body fluid exposures (initial work-up, treatment, and follow-up);
- Any communicable disease exposures and follow-up;
- Yearly tuberculosis screening
- All work-related injuries, illnesses, and follow-up;

Appointments for these services may be scheduled online at the following link: https://webchartnow.com/wakehealth/

For all acute or chronic health problems, students are encouraged to utilize primary care physicians by calling the Wake Forest Baptist Health Access Center at (336) 713-1298. Employee Health will provide annual TB screenings and flu vaccines at no charge. All additional services will result in charges billed to students’ accounts. Employee Health does not accept personal health insurance. Please refer to the Student Health Requirements policy for more detailed information on financial responsibility for student health needs.

Contact Employee Health at (336) 716-4801 with questions regarding the Student Health Services offered in Employee Health.

Appointments/Healthcare Needs

Director of Student Health

For help with identifying a primary care provider, scheduling appointments with specialists, sick visits, or navigating the health system, please contact the Wake Forest Baptist Health Access center at 336-713-1298 or contact the Director of Student Health at mknudson@wakehealth.edu.

Please note that you must identify yourself as a student when calling to make appointments. This will ensure any potential conflicts of interest are managed and you may have access to expedited service as a student.

Wake Forest Baptist Health Access Center for main medical center scheduling: (336)713-1298
Urgent Care Clemmons: (336)713-0400
Weekend Walk-In Family Medicine Reynolda: (336)713-1298

For Boone-based first year PA students, alternative services are available. Contact information will be supplied to those students at orientation.

Disability Insurance

Disability insurance is provided to each student of Wake Forest School of Medicine in keeping with the guidelines of the AAMC. This plan provides a monthly income in the event a student becomes disabled by a covered sickness or injury. Complete information is available in the School of Medicine Benefits Office. This plan is designed to provide coverage for the student as well as the opportunity to purchase additional coverage upon graduation into residency. All students are enrolled in the group plan automatically.
Resources for Off-Campus Education

Global Affiliations
The Medical Center has formal affiliations with Tokai University in Japan; Tromsø University in Norway; Kyungpook National University in Korea; and the University of Vienna in Austria. Global Health electives are arranged for a minimum of one month and must be individually arranged through the Office of Global Health.

Northwest Area Health Education Center
The Northwest Area Health Education Center (AHEC) of Wake Forest School of Medicine, through its Office of Regional Primary Care Education (ORPCE), provides housing to students for clinical placement in primary care for the state of North Carolina. Additional information about student rotation resources is available on the Northwest AHEC Web site: http://northwestahec.wakehealth.edu.

General Resources

Academic Applications
Academic Applications is dedicated to the development and support of technology innovations in medical education. The mission is to provide the infrastructure within which faculty, students, and healthcare professionals can effectively utilize technologies to augment the lifelong learning process.

The office has developed a ubiquitous computing environment, focusing on technology standards in hardware, software, and networking. The students enter the Web-based curricula through a customizable portal. The Web-based curricula manage educational content such as problem-based-learning cases, lectures, education-oriented Web sites, schedules, collaborative discussions, and links to specialty content applications.

Coy C. Carpenter Library
The Library has two locations: the main library is located on the first floor of the medical center’s James A. Gray Building and a student resource center (SRC) is located on the third floor of the Bowman Gray Center for Education building downtown. The SRC houses a small core collection of textbooks and exam study materials that have been selected specifically for 1st and 2nd year medical students as well as a number of anatomical models. The Gray building location houses the print collection and offers study space, 25 general-use PCs, and computer classrooms for individual and group instruction.

The Library’s online digital resources include access to over 1600 eBooks, 3400 journals, 300 clinical procedures videos, tutorials, diagnostic and point-of-care tools, and scientific databases in the biomedical, clinical, and research sciences.

A librarian is assigned to students who alerts them to new resources, answers questions about library services, and provides searching advice.

Free document delivery is provided to all students. The Library provides free printing, photocopying, and faxing as well.

Students also have several options for accessing Coy C. Carpenter Library resources remotely. Students use their VPN to get on the institution’s network and access all resources as if they were onsite. Another option for access is through the Library’s webpage https://school.wakehealth.edu/Carpenter-Library. From that website, the proxy server will prompt them for their affiliated institution (WFU or WFUSM) and they will use their institutional password to access all of the Library’s resources. Once the student is connected to the Library, students have access to 3,486 e-journals, 1,645 e-books, and 158 databases. Coy Carpenter Library’s resources are seamlessly integrated with the undergraduate and law libraries on the Reynolda campus, and students can access and borrow any of those items. For materials not held by the Coy Carpenter Library, Interlibrary Loans are provided for free to students and the Library accepts and evaluates student suggested materials. The Library is open almost 100 hours a week and students are able to call, chat or email someone in the Library during a hours of operation or leave a message for the next day.
Creative Communications

Creative Communications, located on the first floor of the Gray Building, offers a full range of graphic services. Creative Communications also offers a wide range of video services, including video recording, digital video editing, and DVD generation and transfer. Photography services include medical, scientific, and general photography by award-winning, certified photographers using state-of-the-art digital equipment. Complete scanning, retouching, and computer output services are available, as are large poster printers, laminators, and custom framing.

Wake Forest Printing Services offers high-speed copying and offset printing for large copy and print jobs. These services, as well as business cards, can be accessed online.

Athletic Facilities: The School of Medicine Fitness Center features a complete line of Nautilus machines and aerobic machines. The center is on “E” floor of the Hanes Building and is open 24/7 with ID badge access. Membership is free for Wake Forest School of Medicine students. Students may also join the fitness center at Comp Rehab for an additional fee.

Hanes Park is less than a mile away from the medical center campus and contains 20 public tennis courts, which are lighted and in excellent repair. Adjacent to the tennis courts is the YMCA. Special membership rates are available to students at the “Y” upon presentation of a student ID badge. There is also a nearby YWCA located at 1300 S. Main Street, Winston-Salem, and in Innovation Quarter near the new medical school building at 525 Vine St.

Tickets to some WFU athletic events are available in limited numbers.

Banking Facilities: A branch bank is located on the M level of North Carolina Baptist Hospital and is open Monday through Friday from 9:00 a.m. to 5:00 p.m. ATMs are located on the G and M floors of Reynolds Tower, outside the Gift Shop on the M floor of North Tower, and on the first floor of the Bowman Gray Center for Medical Education. A branch bank is also located in Innovation Quarter in Biotech Place.

Bookstore: Students can use the Wake Forest University Taylor Bookstore (located at 1834 Wake Forest Road on the WFU Reynolda campus) to purchase textbooks. For additional information, please call 336-758-3388 or e-mail wfu@bkstr.com. The bookstore is open from 8:30-5:00 on Monday-Friday, 10:00-4:00 on Saturday, and 12:00-4:00 on Sunday during the fall semester.

Parking Facilities: Parking is available in student lots at both the medical center and the Bowman Gray Center for Medical Education. Badge access is required to enter all student lots. Please contact the Office of Student Affairs for assistance with badge access and parking. Bicycle racks are located beneath the foyer of Babcock Auditorium, at Baptist Hospital under the deck at the basement entrance to the patient tower, and at the Bowman Gray Center for Medical Education in the courtyard.

Security: The Medical Center Security Service provides continuous patrols and surveillance throughout the medical center. Care should be taken by all when traveling through darkened halls and parking lots. The medical center Security phone number is 716-3305 and should be called to obtain escort service from the building when needed. Security at the Bowman Gray Center for Medical Education is provided by Sunstates Security and can be reached by calling (336) 713-1568.

Medical Center Alerts/Codes

When initiating an emergency alert, students should:

Contact the Emergency Communications Center (ECC) at 716-9111 to report the specifics of the emergency.
Supply as much information as possible to the ECC Operator.
ECC Operators will script the plain language text and initiate the appropriate notification as expeditiously as possible using the wording in the Plain Text Matrix as appropriate.
### Facility Alerts

<table>
<thead>
<tr>
<th>Event</th>
<th>Recommended Plain Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evacuation/Relocation</td>
<td>Facility Alert + Relocation/Descriptor + Location</td>
</tr>
<tr>
<td>Fire/Alarm</td>
<td>Facility Alert + Fire or Type of Alarm + Descriptor/Location</td>
</tr>
<tr>
<td>Mass Casualty</td>
<td>Facility Alert + Mass Casualty Plan Activated</td>
</tr>
<tr>
<td>ED Surge</td>
<td>Facility Alert + ED Surge Plan Activated</td>
</tr>
<tr>
<td>Utility Failure</td>
<td>Facility Alert + Type of Utility Failure/Location</td>
</tr>
<tr>
<td>Dangerous Weather (Tornado etc.)</td>
<td>Facility Alert + Dangerous Weather Alert/Descriptor</td>
</tr>
</tbody>
</table>

### Security Alerts

<table>
<thead>
<tr>
<th>Missing Infant/Child</th>
<th>Security Alert + Missing Person (Infant or child) + Last Know Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing Person &gt; 18 YOA</td>
<td>Security Alert + Missing Person (Adult) + Last Known Location</td>
</tr>
<tr>
<td>Armed Intruder/Active Shooter/Hostage Situation</td>
<td>Security Alert + Special Instructions + Descriptor (Type of Threat) + Location</td>
</tr>
</tbody>
</table>

### Medical Alerts

- CPR Involving a Patient: Code Blue + Location

### Targeted Communications Only

<table>
<thead>
<tr>
<th>Facility Alerts</th>
<th>Security Alerts</th>
<th>Medical Alerts</th>
</tr>
</thead>
<tbody>
<tr>
<td>HazMat Incident</td>
<td>Bomb Threat/Suspicious Package</td>
<td>Code Stroke</td>
</tr>
<tr>
<td>Patient Decontamination</td>
<td>Civil Disturbance</td>
<td>Code Sepsis</td>
</tr>
<tr>
<td>Severe Weather Plan</td>
<td>Controlled Access</td>
<td>Code Stemi</td>
</tr>
<tr>
<td></td>
<td>Combative/Unruly Person</td>
<td>Code 44</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Peds Code Blue</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Trauma Codes</td>
</tr>
</tbody>
</table>

To report security problems, call 716-3305.
**Compliance Requirements:** Below is a list of documents that are acknowledged at orientation and annually thereafter by all students. In addition to these documents, students may be asked to acknowledge program specific policies and/or procedures.

<table>
<thead>
<tr>
<th>Document</th>
<th>Federal Regulation</th>
<th>Institutional Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confidentiality Agreement</td>
<td></td>
<td>Confidentiality of Information (Student Handbook) Information Security Policy</td>
</tr>
<tr>
<td>Consent to be Photographed, Videotaped and/or Interviewed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability Services</td>
<td>34 CFR Part 668 Rehabilitation Act of 1973 Section 504 American with Disabilities Act of 1990 (Title II)</td>
<td>Policy and Procedure for Student Disability Accommodations Request Student Disability Grievance Procedures</td>
</tr>
<tr>
<td>Email &amp; Internet Usage</td>
<td></td>
<td>Solicitation and Distribution Policy Information Security Policy</td>
</tr>
<tr>
<td>The Family Educational Rights and Privacy Act (FERPA)</td>
<td>34 CFR Part 99</td>
<td>Student Education Records Policy</td>
</tr>
<tr>
<td>Payment Responsibility</td>
<td></td>
<td>Student Payment Policy</td>
</tr>
<tr>
<td>Learning Environment, Professionalism and Student Mistreatment</td>
<td></td>
<td>Learning Environment, Professionalism and Student Mistreatment</td>
</tr>
<tr>
<td>WFBMC Student Sexual Misconduct Policy</td>
<td>34 CFR Part 106</td>
<td>WFBH Sexual Harassment and Sexual Misconduct Policy</td>
</tr>
<tr>
<td>Federal Financial Aid Drug Policy</td>
<td>34 CFR 668.40</td>
<td>Student Substance Abuse Policy</td>
</tr>
<tr>
<td>Drug-Free Schools</td>
<td>34 CFR Part 86</td>
<td>Student Substance Abuse Policy</td>
</tr>
<tr>
<td>Annual Disclosure to Enrolled Students</td>
<td>PL 110-315</td>
<td>Student Right to Know</td>
</tr>
<tr>
<td>Employee Health Services Financial Responsibilities Agreement</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Doctor of Medicine Degree**

The degree “Doctor of Medicine” is awarded to certify that the student has acquired a general knowledge in all fields of medicine and basic skills requisite for the independent practice of medicine. Candidates for the M.D. degree must have abilities and skills in seven general areas: observation; communication; motor; intellectual-conceptual, integrative, and quantitative; and behavioral and social. Technological compensation can be made for some disadvantages in certain areas, but a candidate should be able to perform in a reasonably independent manner. The use of a trained intermediary in a way that a candidate’s judgment must be mediated by someone else’s power of selection and observation is not acceptable.

**Technical Standards for Medical School Admission, Continuation, and Graduation**

**PURPOSE**

The MD degree is a broad undifferentiated degree attesting to general knowledge in medicine and the basic skills required for the practice of medicine. Essential abilities and characteristics required for completion of the MD degree consist of certain minimum physical and cognitive abilities and sufficient mental and emotional stability to assure that candidates for admission, promotion, and graduation are able to complete the entire course of study and participate fully in all aspects of medical training.

Wake Forest School of Medicine is committed to the full and equitable inclusion of qualified learners with disabilities. We have a proud history of training and employing physicians and researchers with disabilities, as well as developing and employing leaders with disabilities. The School of Medicine provides reasonable accommodations for all qualified individuals with disabilities who apply for admission to the MD degree program and who are enrolled as medical students.

**SCOPE**

This policy applies to all MD program applicants and students.

**DEFINITIONS**

A. **Policy**: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. **WFBH**: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

**POLICY GUIDELINES**

Technical (Non-Academic) Standards for Medical School Admission

Critical skills needed for the successful navigation of core experiences are outlined below:

A. Observation: Students must be able to obtain information from demonstrations and experiments in the basic
C. Communication: Students must be able to communicate effectively, sensitively, and efficiently with patients, their families, health care professionals, colleagues, faculty, and staff. Students must be able to acquire the patient’s medical history in a timely manner, interpret non-verbal information, and establish a therapeutic rapport with patients. Students are also required to record information accurately and clearly; and communicate efficiently in English with other health care professionals.

D. Motor: Students must possess the capacity to perform a physical examination and diagnostic examination and to provide or direct general care and emergency treatment to patients. Performing these examinations requires coordination of both gross and fine muscular movement.

E. Intellectual: Conceptual, Integrative and Quantitative Abilities: Students must be able to assimilate detailed and complex information presented in both didactic and clinical coursework, and engage in problem solving. Students are expected to possess the ability to measure, calculate, reason, analyze, synthesize, and transmit information. In addition, students must be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures and to adapt to different learning environments and modalities. Students must be able to effectively learn, participate, collaborate and contribute as a part of a team. Students will need to synthesize information effectively both in person and via remote technology. Students must be able to formulate a hypothesis, investigate the potential answers and outcomes and formulate appropriate and accurate conclusions.

F. Behavioral and Social Attributes: Students should possess the emotional health required for full utilization of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients, fellow students, faculty, and staff. Training and practice in the medical profession may be physically and mentally taxing. Students should be able to adapt to changing environments, to display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, professionalism, interest, and motivation are all personal qualities that are expected during the education processes.

G. Process for Assessing the Applicant’s Compliance with the Technical Standards

1. By accepting an invitation to interview on our campus, and by accepting an offer of acceptance, a student is acknowledging that they have read these Technical Standards and can meet these standards, with or without reasonable accommodations. Once matriculated, if a student is unable to meet these Technical Standards with reasonable accommodations, the student may not be able to successfully meet the requirements of a medical degree.

2. Students who, after review of the Technical Standards for their program, determine that they require reasonable accommodation to fully engage in the program should contact the Learning Assistance Center & Disability Services to confidentially discuss their accommodations needs.

   a. Reasonable accommodations may include and are not limited to technological adaptations or trained intermediaries, such as interpreters, who facilitate without supplanting, the student’s performance of an essential skill.

3. Given the clinical nature of our programs, time may be needed to create and implement the accommodations. Accommodations are not provided retroactively; therefore, timely requests are essential and encouraged.

4. It is the responsibility of a student with a disability, or a student who develops a disability, and who requires accommodations in order to meet these Technical Standards, to self-disclose to the Learning Assistance Center & Disability Services and request accommodations.
Institutional Goals and Objectives

Wake Forest School of Medicine MD Program

Wake Forest School of Medicine provides a unique medical education developed by a faculty that value self-inquiry, collaboration, curiosity, and leadership. We offer a transformational and supportive experience that develops physicians who set the standard for compassionate, collaborative care; who lead the way in socially responsible healthcare and biomedical sciences locally, nationally, and globally; and who learn, discover, and apply innovative state-of-the-art knowledge and skills to the art of medicine. Students and faculty are equal and active partners in the learning process.

Principles of the MD Program

Wake Forest School of Medicine is defined by a commitment to:

- Empathy and respect for patients and colleagues
- Ethical decision making
- Health equity
- Intellectual rigor and scientific curiosity
- Leadership and innovation
- Patient-centered, team-based care
- Self-inquiry and lifelong learning
- The belief that even the most challenging problems can be solved

Our medical school culture and curriculum are based on these principles. Our faculty value them and model them for students. Although our curriculum evolves as medicine changes, we hold firm to these core values so that above all else, our graduates are trained to practice medicine according to these principles.

Objectives of the MD Program

Knowledge for Practice
Each graduate must demonstrate knowledge of the basic, clinical, and behavioral sciences, and apply this knowledge to patient care.

By the time of graduation, students are expected to:

1.1 Demonstrate knowledge of the normal structure and function of the human body and each of its major organ systems.
1.2 Demonstrate a foundation of cell and molecular biology for understanding mechanisms of acquired and inherited human disease.
1.3 Demonstrate knowledge of altered structure and function of major organ systems that are seen in common diseases and conditions.
1.4 Demonstrate knowledge of the clinical, laboratory, and radiologic manifestations of common disease and conditions.
1.5 Demonstrate knowledge of behavioral, psychosocial, genetic, and cultural factors associated with the origin, progression, and treatment of common diseases and conditions.
1.6 Demonstrate knowledge of the epidemiology of common diseases and conditions within a defined population and systematic approaches useful in reducing the incidence and prevalence of these maladies.
1.7 Demonstrate knowledge of the impact of cultural and psychosocial factors on a patient’s ability to access medical care and adhere with care plans.

Interpersonal and Communication Skills
Each graduate will communicate and interact effectively with patients, their families and members of the inter-professional healthcare team.
By the time of graduation, students are expected to:

2.1 Demonstrate empathic and patient-centered interviewing and communication.
2.2 Demonstrate the ability to obtain an accurate and complete medical history considering the patient’s culture, beliefs, personal preferences, and level of health literacy.
2.3 Demonstrate the ability to communicate effectively, both orally and in writing, with patients, families, and members of the healthcare team/other healthcare professionals.
2.4 Demonstrate the ability to work as a member of a healthcare team, collaborating effectively with other healthcare professionals in caring for patients.

Patient Care
Each graduate will function as a member of an inter-professional healthcare team and provide patient care that is compassionate, appropriate and effective for the treatment of health problems and the promotion of health in diverse populations and settings.

By the time of graduation, students are expected to:

3.1 Elicit in-depth and focused patient-centered histories.
3.2 Perform accurate complete and focused physical and mental status examinations.
3.3 Integrate patient information with clinical and basic science knowledge.
3.4 Select appropriate, relevant laboratory, radiologic and other clinical studies and interpret the results of such studies.
3.5 Develop a differential diagnosis.
3.6 Formulate a plan for the evaluation, diagnosis, and treatment of common clinical problems.
3.7 Recognize patients with life-threatening, emergency conditions and institute appropriate initial therapy.
3.8 Identify opportunities for early intervention, prevention and health education of patients while being mindful of the patient’s readiness and barriers to change.
3.9 Demonstrate technical competence of routine medical procedures.
3.10 Recommend appropriate referral of patients including ensuring continuity of care throughout transitions between providers or settings, and following up on patient progress and outcomes.
3.11 Synthesize and communicate patient information to other health professionals to accomplish safe care transitions and promote effective teamwork.

Professionalism
Our students are expected to demonstrate a commitment to upholding their professional duties guided by ethical principles.

By the time of graduation, students are expected to:

4.1 Demonstrate respect for patients by using the appropriate form of address, attending to a patient’s comfort, displaying appropriate attire and grooming, and honoring a patient’s privacy and right to make decisions.
4.2 Demonstrate responsibility in actions by being punctual, managing emotions when confronted with adversity and confrontation, and recognizing personal and peer impairments.
4.3 Demonstrate honor and integrity by being honest about role and experience level, admitting mistakes and shortcomings, appropriately attributing sources of ideas and data, and respecting boundaries between patients, peers, and educators.
4.4 Demonstrate reverence for human life, understanding that sympathy for suffering is a fundamental concern of the medical profession and that the needs of the patient are paramount and should govern a physician’s actions.
4.5 Demonstrate compassion by recognizing and responding with empathy to others’ emotions and expectations, regardless of gender, race, sexual orientation, culture, socioeconomic status, religion, political affiliation, medical diagnosis, level of adherence, or health literacy/education level.
4.6 Demonstrate a dedication to teamwork, and an understanding of and respect for the unique roles of all members of the healthcare team.
4.7 Demonstrate knowledge of the principles that govern ethical decision-making and rules and regulations regarding healthcare delivery, incorporating them into clinical practice and research.
Practice-Based Learning and Improvement
Each graduate must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning.

By the time of graduation, students are expected to:

5.1 Demonstrate the ability to recognize strengths, deficiencies and limitations in their knowledge and skills.
5.2 Demonstrate the ability to set learning and improvement goals.
5.3 Demonstrate the ability to identify and perform learning activities that address gaps in their knowledge, skills and/or attitudes.
5.4 Demonstrate the use of information technology to optimize learning.
5.5 Demonstrate a commitment to continuously improve their medical knowledge, skills and/or attitudes by incorporating formative evaluation and feedback into daily practice.
5.6 Participate in the education of patients, families, trainees, peers and other health professionals.
5.7 Demonstrate the ability to obtain and utilize information about individual patients, populations of patients or communities of patients to improve care.
5.8 Demonstrate life-long learning skills by continually identifying, analyzing and implementing new knowledge, guidelines, standards, technologies, products or services that have been demonstrated to improve outcomes.

Systems-Based Practice
Each graduate will demonstrate awareness and understanding of the broader health care delivery system and will possess the ability to effectively use system resources to provide patient-centered care that is compassionate, appropriate, safe and effective.

By the time of graduation, students are expected to:

6.1 Advocate for quality patient care and optimal care systems.
6.2 Demonstrate a commitment to balancing risks of harm vs. benefit in patient and/or population-based care as well as exercising cost-awareness.
6.3 Use system resources available to patients, families and communities for health promotion and maintenance, disease prevention, education, treatment, and rehabilitation of medical and psychiatric conditions.
6.4 Identify system errors and common sources of medical error and recommend potential systems solutions.

Interprofessional Collaborative Practice
Each graduate will demonstrate the skills to participate as a contributing and integrated member of an interprofessional healthcare team to provide safe and effective care for patients and populations.

By the time of graduation, students are expected to:

7.1 Identify one’s own role and the roles of other team members, including limitations and boundaries of each role to optimize healthcare delivery and effective healthcare team functioning.
7.2 Work with other health professionals to cultivate and preserve a climate of mutual trust, respect, dignity, diversity, integrity, and ethicality.
7.3 Communicate with respect for and appreciation of all healthcare team members and include them in all relevant information exchange.
7.4 Participate as a high-functioning team member by contributing one’s skills set, supporting other team members as needed and ensuring the functioning of the healthcare team remains optimal (i.e. safe, timely, efficient, effective, and equitable) for patient and population-centered care.
**Personal and Professional Development**

Each graduate will demonstrate the qualities and commitment required to sustain lifelong learning, personal and professional growth.

By the time of graduation, students are expected to:

8.1 Demonstrate self-awareness in identifying limitations (in knowledge, skill, emotion, etc.) and the ability to seek help appropriately and engage in healthy coping mechanisms.

8.2 Develop skills for ongoing improvement as a healthcare provider through self-reflection, critical self-appraisal, and openness to accepting feedback.

Understand that situations involving ambiguity and uncertainty are natural elements of the medical profession and respond to such situations by drawing upon appropriate resources.
Admissions Policies
Transfer and Admissions of Medical Students with Advanced Standing Policy

PURPOSE

The purpose of this policy is to limit the number of students due to class size constraints and a limited number of available courses and clerkships.

SCOPE

This policy applies to all undergraduate medical education (MD) program students.

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES

1. The Wake Forest School of Medicine does not accept transfer students from other medical schools.

REFERENCES

LCME Standard 10.7

REVISION DATES

7/2017; 11/2020
Selection of Medical Students Policy

PURPOSE

The purpose of this policy is to establish a process for the selection of medical students.

SCOPE

This policy applies to all undergraduate medical education (MD) program students.

DEFINITIONS

A. **Policy**: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

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POLICY GUIDELINES

A. The selection of applicants for admission as medical students to the Wake Forest School of Medicine involves a competitive evaluation process, the authority and responsibility for which rests with the Committee on Admissions (COA).

B. The Committee on Admissions establishes and publicizes on the admissions webpage attributes desired of applicants and reviews these attributes annually, aligning them with the School of Medicine's mission and vision and the school's educational goals and objectives.
   a. The selection of applicants is also aligned with the School of Medicine's diversity statement and technical standards to allow for the matriculation of a class of students who demonstrate the ability and commitment to fulfill the purpose of a Wake Forest School of Medicine education.
   b. This selection process is also intended to be compliant with applicable laws and regulations.

C. The Committee on Admissions establishes a competitive evaluation process to include: the initial review of applicants, a secondary application process, extending invitations for and coordinating and conducting on-campus or virtual interviews, voting to extend an offer of admission to an applicant by the COA, management of applicants on the waitlist, and processing offers of admission.
   a. These processes and the training related to them are reviewed annually and approved by the COA.
   b. The details of these processes are specified in the approved training guide, which is reviewed and approved annually by the COA Executive Committee.

REFERENCES

LCME Standards 10.2, 10.3

REVISION DATES

7/2017; 11/2020
International Applicants

Applications are only accepted from U.S. citizens and permanent residents as long as the undergraduate, premedical course work has been done in the United States or Canada. If the undergraduate, premedical course work has been done outside the U.S. or Canada, the applicant must complete some recommended coursework in the United States or Canada prior to applying.

Official Transcripts Required for Accepted Students

The School of Medicine requires the use of the American Medical College Application Service (AMCAS), which supplies the School all post-secondary education grades as part of the application process. Accepted students will be required to provide official transcript(s) to the Office of Admissions with degree conferral noted.

Wake Forest School of Medicine

Academic Year 2021 – 2022

FOUNDATIONS 1 - Class of 2025

F1 LAUNCH Course ........................................... Tuesday, July 6 through Wednesday, July 21, 2021
White Coat Ceremony ................................................................. TBD 2021
Clinical Anatomy & Physiology Course..... Thursday, July 22 through Monday, October 25, 2021
Holiday (Labor Day) ................................................................. Monday, September 6, 2021
Medical Student Research Day ............................................ Wednesday, October 13, 2021
Metabolism & Defense (MAD) Course ...................................................
................................................ Wednesday, October 27, 2021 through Thursday, January 20, 2022
Thanksgiving Recess Begins ........................................... Wednesday, November 24, 2021
Classes Resume ................................................................. Monday, November 29, 2021
Holiday Recess Starts ......................................................... Monday, December 20, 2021
Spring Semester Begins/Classes Resume .......................... Monday, January 3, 2022
Holiday (Martin Luther King, Jr)................................................ Monday, January 17, 2022
Neuroscience Block .............................................. Monday, January 24 through Friday, March 25, 2022
Spring Recess ............................................................... Monday, March 28 through Friday, April 1, 2022
GI Block ................................................................. Monday, April 4 through Thursday, April 29, 2022
CAS Exams – Neuroscience & GI ........................... Tuesday, May 3 & Wednesday, May 4, 2022
Alumni Weekend 2020 ................................................................. TBD, 2022
F1 Ends ................................................................. Wednesday, May 4, 2022
Summer Session (9 ½ weeks) ............................. Wednesday, May 4 through Friday, July 11, 2022

Foundations 2 begins on Monday, July 11, 2022
Wake Forest School of Medicine  
Academic Year 2021 – 2022  

FOUNDATIONS 2 – Class of 2024

Y2 Orientation ..............................................................................................Monday, July 12, 2021
Heme-Lymph Block .......................................................... Monday, July 12 through Monday, August 2, 2021
Pulmonary Block ......................................................... Wednesday, August 4 through Friday, August 27, 2021
Cardiovascular Block ........................................... Monday, August 30 through Monday, September 27, 2021
Holiday (Labor Day) ......................................................... Monday, September 6, 2021
Y2 CAS Exam 1 .......................................................... Wednesday, September 29, 2021
Fall Recess ............................................................. Thursday, September 30 through Friday, October 1, 2021
Alumni Weekend 2020 .......................................................... TBD, 2021
Medical Student Research Day ..................................... Wednesday, October 6, 2021
Renal Block ................................................................ Monday, October 4 through Wednesday, October 27, 2021
Rheumatology Block ........................................... Thursday, October 28 – Monday, November 8, 2021
Endocrinology/Reproduction Block ................ Tuesday, November 9 – Tuesday, December 14, 2021
Thanksgiving Recess Begins ........................................... Wednesday, November 24, 2021
Classes Resume ................................................................. Monday, November 29, 2021
Y2 CAS Exam 2 .......................................................... Thursday, December 16, 2021
NBME Practice Exam ................................................... Friday, December 17, 2021
Holiday Recess Starts ...................................................... Monday, December 20, 2021
USMLE Step 1 Preparation ................................... Monday, January 3, 2022 through Monday, February 7, 2022
Y3 Prep – Transition to Patient Care ................................... February 14-March 4, 2022
Y2 Ends ........................................................................... Sunday, March 6, 2022

USMLE Step 1 must be completed by the end of: Wednesday February 9, 2022
(Recommended Step 1 Completion Date is: Wednesday February 2, 2022)

Please note: A student’s condition of return from an academic Leave of Absence is the receipt of a passing score in hand. For students on a Leave of Absence, please contact the Registrar for additional information on Step 1 testing deadline.
Wake Forest School of Medicine
Academic Year 2021-2022
THIRD YEAR – Class of 2023

Y3 Begins………………………………………………………………..Monday, March 8, 2021
Holiday (Spring Break)………………………………...Friday, April 2 - Sunday, April 4, 2021
Holiday (Memorial Day)……………………………………... Monday, May 31, 2021
Clerkship Activities End………………………………… Sunday, June 27, 2021
Y3 Vacation (1 week)…………………………. Monday, July 5 - Sunday, July 11, 2021
Clerkship Activities Resume…………………………...Monday, July 12, 2021
Holiday (Labor Day)…………………………………….. Monday, September 6, 2021
Clerkship Activities End…………………………………. Sunday, October 31, 2021
Clerkship Activities Resume………………………………... Monday, November 1, 2021
Thanksgiving Recess……….. Wednesday, November 24 @ noon - Sunday, November 28, 2021
Clerkship Activities Resume………………………………... Monday, November 29, 2021
Holiday (Winter Break).………….Wednesday, December 22 @ noon - Sunday, January 2, 2022
Clerkship Activities Resume………………………………... Monday, January 3, 2022
Holiday (Martin Luther King, Jr.)…………………………. Monday, January 17, 2022
Clerkship Activities End……………………………………... Sunday, March 6, 2022
Y3/Y4 Transition Weeks Begin…………………………... Monday, March 7, 2022

Clerkship activities begin at 7 am and end at 5 pm unless otherwise designated by the clerkship.

**Y4 starts on Monday, March 21, 2022**
Wake Forest School of Medicine

Y4 Individualization Phase
Academic Year 2021-2022
Class of 2022

Transition Wks 1-2: ACLS/CPX/OSCE/Orientation
Mon, March 8 – Fri, March 21, 2021
Transition Wk 3: Vacation **barring any make-ups
Mon., March 22 – Fri., March 28, 2021
Y4-1 Begins
Monday, March 29, 2021
Holiday (Spring Holiday 1)
Friday, April 2, 2021-Sunday April 4, 2021
Y4-1 Ends
Sunday, April 5, 2021
Y4-2 Begins
Monday, April 6, 2021
Y4-2 Ends
Sunday, May 23, 2021
Y4-3 Begins
Monday, May 24, 2021
Holiday (Memorial Day)
Monday, May 31, 2021
Y4-3 Ends
Sunday, June 20, 2021
Y4-4 Begins
Monday, June 21, 2021
Holiday (Independence Day)
Sat., July 3 – Mon., July 5, 2021
Y4-4 Ends
Sunday, July 18, 2021
Y4-5 Begins
Monday, July 19, 2021
Y4-5 Ends
Sunday, August 15, 2021
Y4-6 Begins
Monday, August 16, 2021
Holiday (Labor Day)
Monday, September 6, 2021
Step 2 CK & CS Deadline
Saturday, September 11, 2021
Y4-6 Ends
Sunday, September 12, 2021
Y4-7 Begins
Monday, September 13, 2021
Y4-7 Ends
Sunday, October 10, 2021
Y4-8 Begins
Monday, October 11, 2021
Y4-8 Ends
Sunday, November 7, 2021
Y4-9 Begins
Monday, November 8, 2021
Thanksgiving Recess
Monday, November 22 – Sunday, November 28, 2021
Y4-9 Ends
Sunday, December 12, 2021
Y4-10 Begins
Monday, December 13, 2021
Winter Holiday
Monday, December 20, 2021 – Sunday, January 2, 2022
Holiday (Martin Luther King, Jr)
Y4-10 Ends
Monday, January 17, 2022
Y4-11 Begins
Sunday, January 23, 2022
Y4-11 Ends
Monday, January 24, 2022
Y4-12 Begins
Sunday, February 20, 2022
Y4-12 Ends
Monday, February 21, 2022
Holiday (Match Day)
Thursday, March 17, 2022
Y4-12 Ends
Friday, March 18, 2022
Y4-13 Begins
Monday, March 21, 2022
Y4-13 Ends
Thursday, April 14, 2022
Holiday (Spring Holiday 2)
Friday, April 15-Sunday, April 17, 2022
Transition to Residency (2wks / attendance required)
Monday, April 18 – Friday, April 29, 2022
Graduation Preparation (No duties assigned/2 weeks)
Saturday, April 30 - Friday, May 13, 2022
Graduation Weekend
Saturday, May 14 – Sunday, May 15, 2022
Graduation
Monday, May 16, 2022
MD Program Courses

The Foundations Curriculum

The required courses for the first year of the Foundations Curriculum are:

<table>
<thead>
<tr>
<th>Course</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAUNCH</td>
<td>3.0</td>
</tr>
<tr>
<td>Clinical Anatomy and Physiology</td>
<td>12.0</td>
</tr>
<tr>
<td>Metabolism and Defense</td>
<td>10.0</td>
</tr>
<tr>
<td>Systems Pathophysiology I</td>
<td>7.0</td>
</tr>
<tr>
<td>Medical Neuroscience</td>
<td>4.0</td>
</tr>
<tr>
<td>Gastrointestinal System</td>
<td>3.0</td>
</tr>
<tr>
<td>Population Health/Epidemiology</td>
<td>2.5</td>
</tr>
<tr>
<td>Clinical Skills I</td>
<td>2.0</td>
</tr>
<tr>
<td>Medicine and Patients in Society I</td>
<td>0.5</td>
</tr>
<tr>
<td>Introduction to Clinical Reasoning &amp; Integrative Thinking</td>
<td>2.0</td>
</tr>
<tr>
<td>Total:</td>
<td>46.0</td>
</tr>
</tbody>
</table>

Year 1 Courses

LAUNCH
This 3-week course provides a basic overview of the knowledge, skills, attributes, and habits that are central to medical student development and success as aspiring physicians.

The course content will be structured around the following concepts represented by the LAUNCH acronym:

L Learning strategies
A Acclimation to the medical profession (expectations of medical students, concept of entrustable professional activities [EPAs], professionalism,)
U Understanding oneself
N New words and ideas
C Careers in medicine
H Healthy living (strategies applicable to myself and my patients, e.g. nutrition, exercise, sleep, stress management)

Clinical Anatomy and Physiology (CAP)
This course is a system-based course designed around topics of structure, development, and function of the human body as applied to medicine. The course is intended to serve only as an introduction to structure, function, and development. There is an emphasis on regional relationships between anatomical systems, integration of structure and function at both the gross and microscopic level, and context of clinically relevant anatomical concepts. In general, the course will approach topics by:

• Explaining normal organ system function
• Developing an understanding of radiological imaging
• Informing the physical examination
• Preparing for proficiency in common clinical procedures
• Establishing the foundation for clinical reasoning

Metabolism and Defense (MD01)
The goal of Metabolism & Defense (MAD) is to establish a foundation of cell and molecular biology for understanding mechanisms of acquired and inherited human disease. This course combines subject matter from biochemistry, pathology, microbiology, molecular biology/medical genetics, virology, and immunology. Materials included in class presentations are aligned with clinical scenarios in order to apply basic science topics. Each of the major topic areas, biochemistry, pathology, microbiology, molecular biology, medical genetics, virology, and immunology, will have a case developed specifically related to the topics presented in the course.
Systems Pathophysiology I Medical

Neuroscience
Medical Neuroscience is the first systems pathophysiology course, and more than half the content focuses on clinical medicine. The medical neuroscience course is a nine-week interdisciplinary block that covers:

- Basic neuroscience
- Core components of neurology
- Core components of psychiatry and behavioral health
- Principles of pharmacology as applied to the nervous system and its disorders

The course supplies the basic information about neuroscience needed to explore the pathophysiology of the neurological and psychiatric conditions commonly encountered in medical practice. It will introduce you to the principles of neurological and psychiatric diagnosis and supply the basic grounding in pharmacology needed to understand the neurochemical bases of many nervous system disorders and the use of medications in their treatment.

Gastrointestinal System
This course provides instruction regarding the gastrointestinal tract from the mouth to the anus, including the important accessory organs: the liver, the biliary tree, and the pancreas.

- Specific areas of focus include the physiology of digestion and absorption; nutrition; embryology, anatomy, and congenital disorders; genetics; pathology and disease states; microbiology; immunology; and pharmacology.
- Methods of instruction include didactics (35 hours), case-centered interactive learning (6 hours), on-line learning (8 hours), USMLE Step 1-type question review (8 hours), interactive games (3 hours), a live multidisciplinary GI Oncology Conference (1 hour) and self-directed learning. Material covered by on-line learning is addressed in class in the form of USMLE Step 1-type questions and discussion (4 hours, included in the 8 hour total for this method of instruction).
- The course is 4 week in length.
- The course faculty is made up of physician-scientists and clinicians
- Learner knowledge is assessed weekly throughout the course in the form of SRS questions and at the end of the course with the GI Block exam (summative).
- At the end of the course, the learner should have acquired a solid foundation of knowledge of the physiology, pathophysiology, and pharmacology of the GI tract and liver, as well as a preliminary understanding of the prevention, evaluation, and management of patients with diseases of these organs.

Population Health/Epidemiology
Because we are in an era of rapid generation of new knowledge, special skills are needed to access, critically review, and efficiently use good evidence from the medical literature in the care of patients and populations. This course extends across Year 1 and facilitates students’ understanding of medical epidemiology and provides an introduction to evidence-based medicine. Included are an understanding of basic epidemiologic principles, strengths and weaknesses of various study designs, use and interpretation of basic statistics, use and interpretation of diagnostic tests, techniques of efficient literature searching, and framing a precise patient (or population) care question in the areas of diagnosis, prognosis, harm, and therapy. The material will be presented in alternating lecture and small-group formats. Student evaluation includes small-group participation, problem sets, and computer-based examinations.

Clinical Skills 1: Foundations in Clinical Skills (CS1)
The clinical skills curriculum provides students with longitudinal clinical skills training through small-group learning, facilitating the development of the essential skills needed to perform as a clinician, including professionalism, history taking, communication and interpersonal skills, physical examinations skills and clinical reasoning skills. The curriculum is delivered through a series of sessions throughout years 1 and 2, and session are led by clinical faculty instructors. The course philosophy supports a patient- and relationship-centered approach that respects the dignity and value of each patient. Throughout the CS curriculum, students have multiple opportunities to meet and practice talking with and examining patients including real patients in our medical center, as well as standardized patients.

The focus of the first year of this curriculum – CS1 – is introductory history taking, communication, physical examination and clinical documentation skills. Class sessions include interactive tutorials of clinical skills, as well as clinical skills practice with patients, with direct observation and coaching by faculty. For early clinical immersion,
students also attend multiple one-week clinical practice experiences (CPEs) with an assigned ambulatory preceptor. Evaluation of students in CS1 consists of a series of performance-based assessments while interacting with standardized patients.

**Medicine and Patients in Society 1 (MAPS)**
This course sequence is a broad and basic overview longitudinal seminar, designed to prepare students for the integration of behavioral, social and ethical considerations into MS1 core learning about patient care and the role of health care in society. It covers core medical education content in ethics and professionalism, behavior, the medical social sciences, and the medical humanities, and is structured for optimal teaching of these key concepts and skills in the preclinical years. Promotion of critical reflection and respectful dialogue in small groups is an essential component of teaching and learning this material.

**Integrated Ultrasound 1**
The Integrated Ultrasound Curriculum is a supplemental instructional time intended to clarify difficult anatomical relationships and to reinforce knowledge of anatomy and physiology during the study of pathophysiology. The course is designed to maximize student engagement via hands-on laboratory sessions where students will be responsible for obtaining ultrasound images and investigating various anatomic structures.

Each course module consists of a 30-45 minute online didactic component to describe the relevant anatomy and ultrasound imaging combined with a one-hour laboratory session. During the laboratory sessions students will use ultrasound machines to image each other and obtain views of the relevant structures.

**Introduction to Clinical Reasoning and Integrative Thinking(iCrit)**
The Introduction to Clinical Reasoning and Integrative Thinking (iCRIT) course is a small group foundational course in the preclinical curriculum that introduces students to the fundamentals of clinical reasoning and medical decision making using a small group, interactive model based upon interactions with “virtual patients.” This course teaches students how to formulate a differential diagnosis using an hypothesis-driven approach to data-gathering based upon a patient’s complaints and physical examination in the context of their overall health and concurrent medical problems.
The Year 2 Curriculum

The required courses for the second half of the Foundations Curriculum include:

<table>
<thead>
<tr>
<th>Systems Pathophysiology 2:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hematopoietic/Lymphatic</td>
<td>4.0 credits</td>
</tr>
<tr>
<td>Cardiovascular</td>
<td>4.0 credits</td>
</tr>
<tr>
<td>Pulmonary</td>
<td>4.0 credits</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Systems Pathophysiology 3:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Musculoskeletal</td>
<td>4.0 credits</td>
</tr>
<tr>
<td>Renal</td>
<td>5.0 credits</td>
</tr>
<tr>
<td>Endocrinology and Reproduction</td>
<td>4.0 credits</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Skills 2</th>
<th>2.0 credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine and Patients in Society 2</td>
<td>0.5 credits</td>
</tr>
<tr>
<td>Integrated Ultrasound 2</td>
<td>0.5 credits</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td><strong>28.0 credits</strong></td>
</tr>
</tbody>
</table>

Year 2 Courses

Systems Pathophysiology 2 Hematopoietic/Lymphatic
This block further introduces the student to elements of the hematologic and lymphatic systems. The first week is focused on normal hematopoiesis and lymph node development from embryogenesis to the aging. The second week is focused on malignant hematologic disorders, and the third week is focused on the coagulation cascade and various coagulopathies. Each week is comprised of large group teaching, small group teaching where self-directed learning is emphasized, and weekly examinations, both formative and summative. A multidisciplinary approach to teaching is taken, with faculty including clinical specialists, pharmacists, microanatomists, and pathologists. The emphasis will be on concepts central to understanding hematology and the effects on patients experiencing the disorders.

Cardiovascular
The cardiovascular course provides a comprehensive overview of cardiac and vascular physiology, pathology, pathophysiology, and pharmacology. A special effort is made to keep the material both clinically relevant and useful for USMLE Step 1 preparation. The course begins with a brief overview of normal anatomy and function. Next, the course will review how the body maintains blood pressure with particular attention given to hypertension and its sequel. To complement the vascular function of blood pressure, cardiac output and its determinants will be reviewed. Using this material, the course will then synthesize an understanding of how to diagnose and develop treatment strategies for hypotension. Building upon this foundation, we will further develop understanding of congestive heart failure and its treatment. Potential causes of congestive heart failure, such as valvular heart disease and coronary artery disease will be reviewed. Recognizing that atherosclerosis is not limited to the coronary arteries, the next section will review the various manifestations and management of vascular disease. Throughout the course, material covered in lecture will be reinforced with case-based learning sessions to demonstrate how best to use the information to diagnose and formulate treatment plans. The final week of the course includes our patient simulation lab, where students have the opportunity to visualize pathophysiologic processes at work in a simulated patient environment. The student will have the opportunity to demonstrate their knowledge and understanding through multiple choice quizzes, case-based learning activities, and the final multiple-choice examination.

Pulmonary
The course guides learners from a basic understanding of respiratory anatomy and mechanics to an understanding of complex respiratory disease states. This is accomplished through addressing a particular “theme” with each week of the course. Within each week, appropriate material is assigned for independent study and other material is discussed in large or small group settings (see LCMS+ for the specific activity schedule). The final week includes integrative activities designed to help students connect their learning to clinical medical practice.
Systems Pathophysiology 3

Musculoskeletal
The musculoskeletal system is a complex system that encompasses a broad array of conditions and diseases. Some elements are very localized to specific muscles, nerves, etc. but many of the diseases that will be discussed in this block involve not only the musculoskeletal system but also overlap with other systems such as pulmonary, renal and cardiac. The first week will focus on systemic and inflammatory diseases with special attention to the clinical presentation, diagnosis and treatment. Although there may be some ‘spilling’ of these topics into the next week, the second week will be predominately regional musculoskeletal conditions – again focusing on the presentations, diagnosis and treatment. Faculty providing instruction are mostly all clinicians and include a broad array of disciplines including, but not limited to, infectious diseases, oncology, orthopedics, pediatrics, radiology and rheumatology.

Renal
The Renal Course is designed to provide students with a strong background in basic renal physiology and pathology. With a comprehensive base, the primary objective of the course is to prepare students to identify, diagnose and manage complex renal patients in their third and fourth year clerkships. Each week is comprised of both large and small group sessions where self-directed learning is emphasized. A multidisciplinary approach to teaching is taken, with faculty including clinical specialists, micro-anatomists, pharmacologists and pathologists. During the first part of the course, students will initiate their introduction to the field of nephrology with a review of renal anatomy and microanatomy.

Through the nephron, the basic unit, students will explore the many vital functions of the kidney as it relates to blood pressure, water regulation, acid-base balance, excretion of metabolic waste and electrolyte handling. In addition, students will learn the key endocrine hormones of the kidney (i.e. renin, aldosterone, and erythropoietin) and understand their impact on our organ systems. During the second part of the course, students will be exposed to a number of common renal diseases as it relates to structure and function. Students will be able to differentiate between various clinical syndromes; such as nephrotic and nephritic, acute and chronic renal failure. Lastly, students will be exposed to end stage manifestations and treatment modalities of kidney disease through discussions on dialysis and transplant. Students will learn and practice a systematic clinical approach to renal injury. The course will delineate the clinical presentations, diagnostic approaches and treatment principles of each disease process. This course will employ case centered learning to help integrate the students’ knowledge in renal physiology and pathology with clinical applicability.

Endocrinology and Reproduction
This five-week course further introduces the student to essential elements of the endocrine and reproductive systems. The Endocrinology/Reproduction block focuses on the normal function and disease states of the hormonal control mechanisms that regulate homeostasis, metabolism, reproduction, growth, and stress response. The system is taught from the perspectives of relevant anatomy [including microanatomy], physiology, pathophysiology, pathology, and pharmacology. The block emphasizes and understanding of both normal function and diseases of the hypothalamus, pituitary, adrenals, thyroid, parathyroid glands, endocrine pancreas, and gonads, in addition to a focus on topics of great importance such as diabetes mellitus and reproductive medicine. Educational methods include large group teaching, small group activities where self-directed learning is emphasized and intermittent assessment through quizzes that focus on student learning outside of the lecture room. A multidisciplinary approach to teaching is taken, with faculty including both clinicians and basic scientists.

Clinical Skills 2: Applied Clinical Skills (CS2)
The Clinical Skills 2 (CS2) course is the second year component of students’ longitudinal clinical skills curriculum. The overall objective of CS2 is to build upon the foundational clinical skills learned in Year 1 of the curriculum and to prepare students for their upcoming clinical rotations in Year 3. As in Year 1, students will continue to practice and build their fundamental clinical skills including doctor-patient relationship building and communication (DPRC) skills, history taking skills, physical examination (PE) skills, and clinical documentation skills, with an ongoing emphasis on patient–center care, professionalism, and professional identity development. In contrast to Year 1, however, where training is primarily focused on basic data gathering, Year 2 clinical skills training will challenge students to
learn and practice focused data gathering, data interpretation based on your understanding of pathophysiologic mechanisms of disease, iterative differential formulation, and initial diagnostic management decision-making.

**Medicine and Patients in Society 2 (MAPS)**
This course sequence is a broad and basic overview seminar, designed to prepare students for the integration of behavioral, social and ethical considerations into MS2 core learning about patient care and the role of health care in society. It covers core medical education content in ethics and professionalism, behavior, the medical social sciences, and the medical humanities, and is structured for optimal teaching of these key concepts and skills in the preclinical years. Promotion of critical reflection and respectful dialogue in small groups is an essential component of teaching and learning this material. In these domains, as is true for many aspects of modern medical education, the ability to engage in continual learning, starting from a core set of basic concepts, is becoming at least as important as mastery of a body of factual knowledge that is constantly changing and expanding. This overview of core content is intended to provide a knowledge base and learning approach that should be built upon with additional curriculum content in the clinical years.

**Integrated Ultrasound 2**
The Integrated Ultrasound Curriculum is a supplemental instructional time intended to clarify difficult anatomical relationships and to reinforce knowledge of anatomy and physiology during the study of pathophysiology. The course is designed to maximize student engagement via hands-on laboratory sessions where students will be responsible for obtaining ultrasound images and investigating various anatomic structures. Each course module consists of a 30-45 minute online didactic component to describe the relevant anatomy and ultrasound imaging combined with a one-hour laboratory session. During the laboratory sessions students will use ultrasound machines to image each other and obtain views of the relevant structures.
The Year 3 Curriculum

The Year 3 curriculum consists of three 12-week blocks of clinical clerkship rotations in the major specialties, as follows:

<table>
<thead>
<tr>
<th>Weeks</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal Medicine</td>
<td>8 weeks</td>
</tr>
<tr>
<td>Surgery</td>
<td>8 weeks</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Ambulatory Internal Medicine</td>
<td>2 weeks</td>
</tr>
<tr>
<td>OB-GYN/Women’s Health</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Emergency Medicine</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Neurology</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Anesthesiology</td>
<td>2 weeks</td>
</tr>
<tr>
<td>Radiology</td>
<td>Longitudinal</td>
</tr>
<tr>
<td>Basic Clinical Procedures</td>
<td>Longitudinal</td>
</tr>
<tr>
<td>Total</td>
<td>48 weeks</td>
</tr>
</tbody>
</table>

Year 3 Courses

**Internal Medicine**

During this 8-week clerkship, students are assigned to patient care teams and are responsible for the day-to-day care of identified patients. Student responsibilities include obtaining histories and physical examinations, generating differential diagnoses and treatment plans, assessing patients at the bedside, writing daily progress notes to demonstrate level of understanding, presenting patient information to house staff and faculty, and participating actively on rounds by responding to questions of faculty and house staff regarding disease processes and patient care issues.

**Surgery**

During this 8-week clerkship, students will rotate on a number of services and gain experience in factors contributing to the management of many common surgical diseases – including anatomy, disease process, diagnosis, and treatment. They will gain practical clinical experience in operating rooms, the emergency department, intensive care units, floors, and clinic. Students are expected to be well-prepared for all encounters and become an active member of the patient care teams with whom they work. They will also be expected to demonstrate competence in basic surgical skills, such as removal of skin sutures or staples.

**Obstetrics/Gynecology/Women’s Health**

This 6-week experience provides students with exposure to common topics in women’s health in both the inpatient and ambulatory settings. Inpatient activities include exposure to peripartum problems, operative obstetrics, operative gynecology, and common OB/GYN diagnostic and therapeutic modalities. In addition, as part of the high-risk obstetrics team, students are responsible for following patients from admission to discharge, participating in all aspects of care from the initial physical examination to the formulation of a management plan. The ambulatory component focuses on issues relevant to outpatient women’s care.
**Pediatrics**
This 6-week experience is a blend of outpatient and inpatient clinical activities in pediatric health care. The goal of the rotation is to facilitate the development of communication skills and competency in the physical examination of infants, children, and adolescents; an understanding of the influence of family, community, and society on the child in health and disease; the enhancement of clinical problem-solving skills; and the acquisition of knowledge necessary for the diagnosis and initial management of common acute and chronic illnesses in the pediatric population. Clerkship objectives are met via participation as a member of the inpatient ward team and discussion of case vignettes in a small-group setting. The ambulatory component utilizes outpatient clinical settings to enhance students’ skills in synthesis of clinical information, interpretation of physical examination findings, generation of a differential diagnosis, selection of diagnostic tests, and development of a treatment plan.

**Ambulatory Internal Medicine**
The 1-week clerkship focuses on the basic competencies of ambulatory internal medicine. Students are based at the Downtown Plaza internal medicine clinic and will spend time in a variety of outpatient clinical settings. Students will have the opportunity to work with residents, advanced practice providers, faculty, and other members of the interprofessional ambulatory healthcare team.

**Psychiatry**
This 4-week clerkship facilitates student attainment of the knowledge, attitudes, and skills including how to conduct a psychiatric interview and the formulation of an initial differential diagnosis for common psychiatric presentations. Students are routinely expected to evaluate patients, read about the diagnostic possibilities raised by the case, synthesize information, and present the patient on rounds, pursue further diagnostic testing, participate in planned therapeutic activities, and report and record patients’ progress. While on the clerkship rotation, students are expected to read material relevant to their patients’ conditions. They are also expected to utilize standard textbooks and review materials to familiarize themselves with clerkship objectives not addressed by their clinical exposure.

**Neurology**
This 4-week clerkship assists students in addressing the primary clerkship objectives relating to the identification of common neurologic diseases, the recognition of emergency neurologic situations, the management of common neurologic problems, and communication with patients and families of patients with motor, sensory, and cognitive deficits. The process of daily rounds and clinic (ambulatory) conferences, as well as weekly grand rounds, provides students with relevant examples of integrated clinical thinking. Students are expected to pursue independent reading on cases encountered on the wards and in clinics.

**Family Medicine**
The 3-week family medicine clerkship focuses on care in the outpatient clinical setting. The rotation incorporates outpatient clinical experience, small-group case discussion promoting the development of higher-order thinking skills and problem-solving skills. Clerkship objectives include comprehensive, coordinated continuous care, psychosocial aspects of patient care, and group communication and presentation skills.

**Emergency Medicine**
This 4-week clerkship provides students with experience in the diagnosis and initial management of patients presenting to the emergency department. Students complete 7-8 eight-hour shifts during the clerkship and participate in simulation labs, lectures, and bedside teaching with Emergency Medicine faculty.

**Anesthesia**
During this 2-week introduction to the management of perioperative patients- including preoperative assessment, intraoperative management, resuscitation skills and pain management- students will gain practical clinical experience in operating rooms and clinics. These settings will expose them to anesthesiology and surgical faculty and residents, other care providers, and patients and their families. This practical clinical experience will be supplemented by appropriate educational experiences in various conferences.
Radiology
Radiology is a required year-long course which provides an introduction to diagnostic radiology. The purpose of this clerkship is for the third year medical student to gain a basic understanding of diagnostic radiology and its role in patient diagnosis and treatment. The radiology curriculum is integrated into several clinical clerkships of Year 3: internal medicine, surgery, emergency medicine, neurology, psychiatry, OB/GYN, and pediatrics. During each of these clerkships (or clerkship blocks), individual radiology sessions will highlight disease processes that the students will likely encounter on those particular clinical clerkships. During the sessions, which last from 1 to 2 hours, the students will independently review pre-learning modules, to be followed by an interactive case conference whose goal is to illustrate concepts described in the modules.

Basic Clinical Procedures
Basic Clinical Procedures is the first of two required courses that comprise the Wake Forest Procedures Curriculum. In this course, students are introduced to basic clinical procedures and given the opportunity to learn about each procedure via multi-media online educational modules. Students then observe and participate in these procedures, students are expected to seek out opportunities to perform the procedures under appropriate supervision. The final examination for this course is the Procedures Objective Structured Clinical Examination (OSCE), a proctored exam where students are observed performing selected procedures in standardized simulated environments.
The Year 4 Curriculum

Year 4 consists of 4-week blocks including two required selectives, 8 electives, 3 weeks of USMLE Step 2 preparation, and 9 weeks of interview time. Students are required to complete two 3-week selectives (one Advanced Inpatient/Acting Internship Management and one in Critical Care). The remaining time is available for approved electives. All Year 4 scheduling, including the Course Catalog and course selection is available through the PeopleSoft Student Center.

<table>
<thead>
<tr>
<th>Selective</th>
<th>No. of Weeks</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advanced Inpatient Management/Acting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internship Management (AIM) - Two 4-week rotations</td>
<td>8 weeks</td>
<td>8.0</td>
</tr>
<tr>
<td>Critical Care</td>
<td>4 weeks</td>
<td>4.0</td>
</tr>
<tr>
<td>Electives</td>
<td>24 weeks</td>
<td>24.0</td>
</tr>
<tr>
<td>Geriatric and Palliative Care</td>
<td>2 weeks</td>
<td>2.0</td>
</tr>
<tr>
<td>Advanced Clinical Procedures</td>
<td>Longitudinal</td>
<td>1.0</td>
</tr>
<tr>
<td>Transition to Residency</td>
<td>2 weeks</td>
<td>2.0</td>
</tr>
<tr>
<td><strong>Total 41 weeks</strong></td>
<td></td>
<td><strong>41.0</strong></td>
</tr>
</tbody>
</table>

In response to COVID-19, students will be unable to participate in rotations extramurally (including global health/international opportunities). Exceptions will be made for students who are A) completing active duty military assignments or B) cannot complete a rotation within the WFSM Health System necessary for the student’s desired residency. If a student falls under “B”, the institution a student rotates at must be within the state of North Carolina.

Year 4 Courses

Advanced Inpatient/Acting Internship Management Selectives (AIMs)

Students complete at a minimum one AIM rotations, selected from one of the following disciplines: Surgery, Psychiatry, Emergency Medicine, Anesthesiology, Obstetrics & Gynecology, Internal Medicine, Neurology, and Pediatrics. The primary goal of this selective experience is the development of students’ abilities in complete patient management. Students are actively involved in all aspects of patient care, including primary work-up, development of differential diagnoses, in-hospital patient management, and post-hospital care planning. Goals and objectives for each approved AIM are listed in the Year 4 Program Guide published online. As part of the AIM rotations, students must complete a Self-Directed Learning activity in which they drive their learning to meet a self-identified knowledge gap.

Critical Care Selective

The primary objective of this selective is to expose students to patient care in the intensive care setting, with emphasis on patient management issues, such as differential diagnosis, rational laboratory and radiologic testing, and acute and chronic management of patients with multiple medical and surgical problems. Student participate as an integral part of the intensive care team, in the Medical Intensive Care Unit (MICU), Coronary Care Unit (CCU), Neurosurgical Intensive Care Unit (NSU), Cardiothoracic Surgery Intensive Care Unit (CTSU), Pediatric Intensive Care Unit (PICU), Neonatal Intensive Care Unit (NICU), Surgical Intensive Care Unit (SICU) or the Trauma Surgery Unit (TICU).

Students assume supervised responsibility for patient admission, evaluation, diagnostic testing, and initiation and evaluation of therapy and are exposed to patient-care issues such as end-of-life decisions, patient disposition, and family healthcare dynamics. Students also spend time in the Patient Simulation Laboratory (PSL), where they have the opportunity to learn and practice management skills relating to acute cardiovascular, pulmonary, renal, and neurologic intensive care. As part of the Critical Care rotations, students must complete a Self-Directed Learning activity in which they drive their learning to meet a self-identified knowledge gap.

Advanced Clinical Procedures

Advanced Clinical Procedures is the second of two required courses that comprise the Wake Forest Procedures Curriculum. In this course, students are introduced to advanced clinical procedures and given the opportunity to learn about each procedure via multi-media online educational modules. Students then observe and participate in these
procedures as part of their clinical experiences. For specifically identified procedures, students are expected to seek out opportunities to perform the procedures under appropriate supervision. Procedures are tracked during the first course in this series, Basic Clinical Procedures, will be credited towards the requirements for completing this course.

**Transition to Residency**

This course serves as the final capstone experience of the Wake Forest School of Medicine curriculum. The course is required for all students who will have completed all required and elective preclinical coursework and clinical clerkships and is mandatory for successful graduation.

The course is designed to augment the transition of senior medical students from their supervised clinical clerkships to independent practice as interns. The course consists of 50 required hours of curricular activity spread over 2 weeks and is divided into 3 components:

1. **Required activities for all students**: these activities are mandatory for all students; attendance and participation are required for successful completion of the course.

2. **Specialty oriented “selective” tracks**: these specialty-specific tracks consist of a group of lectures, small and large group activities which are oriented towards students who will be pursuing like-internships. Students are required to complete one of the specialty-specific tracks.

3. **Electives**: these activities are optional and designed to provide students with the ability to tailor a component of their capstone experience to meet their own curricular needs. Students are not required to complete all electives but will select enough electives to complete the total required hours of coursework per week.

Required activities are mandatory. Students have the opportunity to select the “selective” track that most closely aligns with the student’s upcoming internship. Within each track, all coursework is mandatory. Electives are available through an electronic request system. Methods of instruction include mini-lectures (i.e. 30-40 minute rapid reviews), small and large group activities, simulation, and procedure-based experiential activities.

The course has been designed and prepared by faculty and is facilitated by leading clinical educators, clerkship directors, program directors, fellows, residents and other interprofessional healthcare provided according to their area of expertise.

All students will establish, monitor, and assess a personalized learning plan which will be facilitated by the course director and course liaisons. All students will be required to develop this personalized learning plan on day 1, turn in a mid-course assessment of their progress, and complete a final reflective assessment of their learning plan for successful completion of the course.
Doctor of Medicine Program Policies and Procedures

Matriculation Policy

PURPOSE

The purpose of this policy is to establish the point at which incoming students are matriculated.

SCOPE

This policy applies to new undergraduate medical education (MD) students.

DEFINITIONS

A. **Policy**: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. **WFBH**: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES

A. For the new medical student(s), matriculation will be official when the Associate Dean for Medical Student Admissions, or a designated representative, states to the student(s), “You are now officially matriculated at the Wake Forest School of Medicine.” This statement will usually be made at the first day of Orientation.

REVISION DATES

8/2013; 1/2021
Code of Honor and Professional Conduct

I. Philosophy of Honor System

We at the Wake Forest School of Medicine believe medicine is an honorable profession. Those endeavoring to practice medicine are motivated by a desire to help heal the sick and infirm and to comfort the dying and their loved ones. Thus, inherent to the practice of medicine are the virtues of honesty and responsibility. We must remain accountable and responsible for our actions and failures to act.

Our responsibility as medical students to uphold said virtues also requires us to abide by this Code of Honor and Professional Conduct for the Wake Forest School of Medicine. The purpose of the Code is to state our commitment to the principles of honesty, trustworthiness, and responsibility among students, faculty, staff, and patients, as well as to establish a system to promote the practice of these virtues. It will also provide a means to investigate, and, if necessary, pass judgment on alleged infractions of the Code. The Code also tasks students with the responsibility for holding themselves and others accountable to its principles.

II. Standards of Honor and Professional Conduct

Physicians are called to the highest standards of honor and professional conduct. However, our responsibility to patients, their families, faculty and staff precedes the receipt of a medical degree. This responsibility begins upon matriculation as a medical school student. As such, the students of the Wake Forest School of Medicine commit to embody the following virtues and uphold the standards they entail throughout the duration of enrollment:

A. Honesty

1. Be truthful and forthcoming in communication with others.
2. Refrain from cheating, including, but not limited to, copying the answers of another student on an examination, unauthorized use of previous editions of examinations, reproducing information on an examination for other students who have not taken the examination, or any other use of unauthorized information or assistance on an examination or assignment.
3. Refrain from plagiarism, including, but not limited to, dishonest representation of another’s work as one’s own.
4. Refrain from lying or making misrepresentations in the fulfillment of academic requirements.
5. Refrain from falsifying or deceitfully representing information regarding clinical work or patient care, including, but not limited to, reporting or documenting false lab values or other unverified patient information.

B. Trustworthiness

A. Maintain the confidentiality and security of patient information.
B. Admit errors and not promote ourselves at the patient’s expense.

C. Professional demeanor

1. Be thoughtful and professional when interacting with patients and their families.
2. Strive to maintain our composure under pressures of fatigue, professional stress, or personal problems.
3. Avoid offensive language, gestures, or inappropriate remarks that are reasonably offensive to others.
4. Maintain a neat and clean appearance, and dress in attire that is reasonable and accepted as professional to the patient population served.

D. Respect for the rights of others

1. Create an atmosphere which encourages learning, characterized by cooperation and respectful relationships with the patient population served.
2. Deal with all members of the health team in a considerate manner and with a spirit of cooperation.
3. Act with an egalitarian spirit toward all persons encountered in a professional or academic capacity, regardless of race, religion, gender, sexual preference, age, disability or socioeconomic status.
4. Respect the right of patients and their families to be informed and share in patient care decisions.
5. Respect patients’ modesty and privacy.

E. Personal accountability

1. Participate responsibly in patient care to the best of our ability and seek out help or appropriate supervision when necessary.
2. Responsibly complete any clinical duties that we have undertaken.
3. Notify the responsible person if something interferes with our ability to perform clinical tasks effectively.

F. Concern for the welfare of patients

1. Treat patients and their families with respect and dignity both in their presence and in discussions with others.
2. Recognize when our ability to function effectively is compromised, and ask for relief or aid.
3. Refrain from alcohol or drug use that compromises or could compromise patient care or our own performance.
4. Not engage in romantic, sexual, or other non-professional relationships with a patient, even at the request of a patient.

G. Non-retaliation

Refrain from any action that could be construed as retaliation against a fellow student or faculty member who has reported a potential violation of the Honor Code or other Medical School policy, regardless of the outcome of such a report.

H. School Representation

In addition to the behavior described in the Code of Honor and Professional Conduct, we shall demonstrate behavior which is considered appropriate for a career in medicine and will avoid conduct on and off campus which would discredit the School of Medicine, ourselves, or the profession of medicine. This includes violations of criminal statutes. Inappropriate or unprofessional conduct relevant to the student’s eventual successful career in medicine may be reviewed by The Honor Council and subsequently both the Associate Dean of Student Affairs and the Senior Associate Dean of Healthcare Education (referred to collectively as “Deans” for the remainder of the Code) and SPARC as prescribed in Section V.

I. Witnessing Violations

Each student carries the personal responsibility to report concerns regarding possible violations of the Code that he or she witnesses. In addition, each student must report concerns when s/he has sufficient information to believe a violation has occurred. Failure to report such concerns will be considered a violation of the Code.

III. Interpretations and Applications

A. Upon acceptance to the Wake Forest School of Medicine, each new student shall receive a copy of The Code and/or information regarding where to find electronic copies of the Code.

B. Each matriculating student will sign the Honor Pledge during orientation. Students are required to sign the Honor Pledge. An official record will be made of the signees and will be kept in the Office of Student Records. The Honor Code and System will be applicable to all students. The Honor Pledge can be found in Appendix II; this pledge may be used as deemed appropriate by students and faculty, e.g., as a posting in a lab or lecture hall, but it may not substitute for Appendix I on a graded assignment.

C. Appendix I will apply to all graded assignments during any phase of the Wake Forest School of Medicine course of study, and will appear on all quizzes or examinations. If the assignment is electronic, the student is responsible for reading all of Appendix I and will be required to press an “I Accept” button or its equivalent before being allowed to begin the assignment. For paper assignments, the student will be asked to sign below Appendix I as a symbol of acceptance and understanding that the Honor Code pertains to the assignment.
IV. The Honor Council

A. Composition

1. Twelve student members will comprise the Honor Council, with a quorum of seven members required when the Council is voting on any matter, is holding a hearing, or is voting on revisions to the Code. Each class will elect three members to serve terms of three and one-half years. Election of new members will take place in November of each academic year. No one shall be considered eligible for election to the Honor Council if they are not in good academic and professional standing as defined in the yearly WFSM Bulletin, which can be found through the eWake website. A quorum will be five members when there are only nine members of the Honor Council during the first half of each year.

2. One faculty member will be appointed to a one year term by the Council to serve as Advisor to the Honor Council. This faculty member must also be a member of the SPARC. There is no limit on the number of terms a faculty member may serve as Advisor. The advisor may be present at meetings of the Honor Council.

3. Terms and Conditions of Office

   a. Medical students who are candidates for a joint degree are eligible to serve as their matriculating class’ Honor Council representative. However, at the time they leave their medical school class to begin the other component of their degree, they will permanently cease to be an Honor Council member. Should this situation arise, four members will be elected from the original matriculating class of the joint degree candidate to ensure adequate representation when the student leaves.

   b. Members who do not progress with their matriculating class will no longer be eligible to serve as an Honor Council representative. Election of a new member from the appropriate class will take place as soon as possible.

   c. Honor Council members may not also serve as the president, vice president, secretary, or treasurer of his or her individual class or of the Student Body. Also, no Council member will hold a position on the Health and Effectiveness Committee.

   d. In the event that a Council member is believed to be performing their duties unsatisfactorily, the Honor Council Chair shall be informed and will call for a meeting to discuss the case. After discussion, the member in question may be removed from the Council by a three-quarters vote of the Council members. Election of a new member from the appropriate class will follow as soon as possible.

   e. No student that has previously been convicted of an infraction against the Code in a hearing shall be elected to the Honor Council. Any Council member found guilty of an Honor Code violation in a formal hearing shall be immediately removed from the Council, with his or her position filled as soon as possible by election from the appropriate class.

   f. If a council member is dismissed from the Wake Forest School of Medicine, an election for a replacement council member from the appropriate class will be held as soon as possible to replace this member.

4. Officers

   a. The Chair and Vice Chair of the Honor Council shall be elected annually and shall have served at least one year on the Honor Council. He or she shall be elected by the Honor Council in March or April and shall serve a term of one year. The duties of the Chair are as detailed in the Disciplinary Procedures section of this document. The Vice Chair shall fulfill the duties of the Chair when the Chair is unavailable.

   b. The Secretary of the Honor Council shall be elected annually. A one year prior service requirement is not required to hold this position. He or she shall be elected by the Honor Council in March or April and shall serve a term of one year. The Secretary shall keep record of Honor Council meetings and draft Honor
Council correspondence. The Secretary shall fulfill the duties of the Chair when the Chair and Vice Chair are unavailable.

b. All three officer positions cannot be held simultaneously by 4th year medical students.

5. Faculty Advisor
   a. The Faculty Advisor will be an active faculty member, and shall be a current member of SPARC.
   b. The responsibilities of the Faculty Advisor are to serve as both an educator for and a liaison between the faculty and the Honor Council.
   c. To maintain the confidentiality of the accused student’s identity during disciplinary procedures, the Faculty Advisor will not be present during the hearing or deliberations. However, the Faculty Advisor will be available for consultation by phone during deliberations. Should the faculty member be consulted at such time, identifying information of the accused will not be discussed.
   d. The Faculty Advisor may request to be dismissed from his/her duties at any time by notifying the Honor Council Chair. At such a time, the Honor Council Chair will notify the Dean and may request the Dean’s assistance in selecting a new Advisor. A majority vote of the Council will appoint a new Advisor.

B. Duties and Responsibilities
   1. The members of the Honor Council shall uphold the values of The Code and act in accordance with the requirements of the Code as examples for all medical students and members of the medical profession.
   2. The Honor Council shall educate the student body on the Code and the duties of individuals in the Wake Forest School of Medicine community living under the Code.
   3. The Honor Council shall be responsible for receiving accusations, initiating investigations of suspected infractions, holding hearings in a fair and impartial manner, and counseling students when appropriate. The Council shall seek objective evidence that an infraction has occurred. At all times, the members of the Honor Council should maintain an attitude of impartiality when reviewing the evidence presented to them. Furthermore, all cases will proceed under the assumption that the accused is innocent until proven responsible for a violation of the Code.
   4. Each member of the Honor Council, excluding the Chair and the Secretary, may be required to participate in the Honor Council process as an Investigator of reported violations. The member who is selected to serve as the Investigator in a case will solicit evidence and interview witnesses in an unbiased manner. Members of the Honor Council shall not serve as Investigator for a particular case if they feel themselves unable to act fairly or impartially in this duty. If another Honor Council member feels another member will be unable to do so, the Honor Council member must share the concern with the Chair, who will make a decision. In the event the concern pertains to the Chair, the Vice Chair will make a decision. Also, any Council member who feels unable to deliberate hearings for a particular case fairly or impartially, for any reason, should inform the Chair and discuss a plan for proceeding without that member’s participation.
   5. The Chair of the Honor Council shall prepare an annual report to be presented to the Wake Forest School of Medicine student body, faculty, and administration, detailing the number of hearings held and, the offenses, verdicts, and sanctions recommended by the Honor Council. The report will also contain a tally of accusations resolved by counseling, as categorized under Section II. Anonymity of the involved parties will be maintained. This report shall be submitted annually prior to graduation of the fourth-year class.

C. Confidentiality

All information relating to any Honor Council proceeding, including investigations, shall be considered confidential. All individuals involved in an Honor Council proceeding must maintain that confidentiality at all times, unless disclosure is required by law, or when disclosure is otherwise permitted under this Code. Violation of this confidentiality requirement is itself an Honor Code offense. The student accused of violating the Honor
Code may choose to waive his or her right to confidentiality at any time by giving written notice to the Chair of the Honor Council. The accused shall have the right to divulge any information concerning his or her case, except for the names of the witnesses, to any person whose confidence he or she has chosen to seek.

V. Disciplinary Procedures

A. Reporting a suspected infraction of The Code

1. When a member of the Wake Forest School of Medicine community has reason to believe that a medical student has violated the Code, he or she should discuss the concern with an Honor Council member or address the concern to one of the Deans. The usual and preferred action from the Dean who receives the concern will be to refer the matter to the Honor Council for review in accordance with this Code. The Dean may, however, choose to not refer to the matter to the Honor Council in his/her discretion, such as when the Dean determines the matter is too sensitive or egregious for the Council’s purview, or when other policies warrant direct referral to SPARC or another process for review and resolution. The Deans and Chair will meet biannually to discuss, in general terms and without revealing the identity of the students involved, the concerns reviewed by each, including cases not referred to the Council, to promote a mutual understanding of the types of circumstances that may or may not warrant referral to the Council.

2. To bring a formal charge before the Honor Council, the concerned person should report the complaint in writing by email or via the SGA website to the Chair of the Honor Council or an Honor Council member. At this time, he or she must disclose his or her name, the name of the accused student, the names of any witnesses and the suspected violation. The name of the reporting witness will only be known to the Honor Council member who received the report and the Chair. A member of the Wake Forest School of Medicine community has a duty to report a suspected infraction to the Honor Council or the Deans within 30 days of becoming aware of the infraction.

B. Post-reporting Procedures

1. The Chair of the Honor Council shall follow one of four courses upon receipt of a concern:

   a. Initiate an investigation

   b. Convene a meeting of the Honor Council if the Chair feels for any reason that a reported behavior does not constitute a violation of the code and thus may not need to proceed to a formal hearing. The Chair will set forth their concerns before the Council, and a majority vote by members present will decide whether the reported behavior constitutes a violation of the Code. A quorum is not necessary for such a vote, but all reasonable effort must be made to consult as many members as possible.

   c. Allegations of an Honor Code violation which would also constitute a violation of the School of Medicine’s Student Sexual Misconduct Policy, or other policies of the School of Medicine or Wake Forest Baptist Health, or where criminal charges related to the allegations are pending against the accused, must be referred by the Honor Council to the Deans for proper handling. The Deans reserves the right, after careful consideration, to refer any such case to the SPARC or back to the Honor Council to be managed according to the Honor Council process.

   d. If council members are concerned about the wellbeing of the accused, the Chair will share this information with the Deans to aid in helping the student.

C. Investigation

1. Upon appointment by the Chair of the Honor Council, the Investigator shall promptly begin collecting information about the suspected violation. The Investigator shall:

   a. interview the accused student;

   b. interview the person(s) placing the complaint;

   c. conduct interviews with any others, including students or faculty, who may have pertinent information
relating to the alleged infraction;
d. review document(s) or other evidence relevant to the suspected violation;
e. report findings to the Honor Council.
f. If a case proceeds to a hearing, the Investigator will compile a case summary and provide it to the accused and council members at least 24 hours before a hearing.

2. During the investigation, the names of all witnesses and the accused will be anonymous to the rest of the Honor Council.

D. Determination of need for hearing

1. When a formal hearing is deemed unwarranted by majority vote, Council members may opt to counsel and provide appropriate resources to the accused regarding his/her professional conduct. The accused will be notified that a meeting will take place with an Honor Council officer and at least one other Honor Council member. The purpose of the meeting will be to address the accused’s professional conduct as it pertains to the allegation. A report will be maintained by the Chair of the Honor Council, including a brief description of the event and the student’s name, for record-keeping purposes. The Chair shall reveal to the Council records of any such meetings at the time of a future investigation of the accused, but will maintain the anonymity of the accused until the determination of a need for a hearing.

2. If the Honor Council determines the need for a meeting with the accused student as described above, such action is considered to be a finding by the Council of a violation of the Code, and the name of the student and nature of their infraction, as well as the result of the meeting, will be given to the faculty advisor for the Honor Council to ensure a faculty record of the meeting is maintained. The student’s identity will remain anonymous to all other faculty members unless the faculty advisor determines that further action may be necessary due to the student’s prior disciplinary history.

3. If a majority vote of the council determines the need for a formal hearing, the Chair of the Honor Council will:
   a. compile the list of formal charges;
   b. deliver the charges to the accused;
   c. schedule the date for the Honor hearing. Except under extenuating circumstances, such as unavailability of Council members or witnesses, the date of the hearing will be no later than ten business days after the formal complaint has been received, excluding school holidays;
   d. send notices to all persons who must be present at the Honor Hearing, including all witnesses. The Chair will also inform the Council members of the name of the accused.
   e. The accused student will be told the names of all witnesses, with the reporting witness’ name included only as a witness to the violation, at the time they are notified of the scheduled date of the hearing.

E. Rights of the accused

1. Any student who has been accused of violating the Code and whose case is proceeding to a hearing shall have the following rights. The accused student shall be given a copy of this Honor Code when he or she receives initial notification of the charges.
   a. Right to timely notification of the charge(s) against him or her.
   b. Right to have all details of any charges and knowledge of Honor Council proceedings kept confidential. Only individuals specified in this Code should be provided information regarding Honor Council business and proceedings, except when disclosure of information may otherwise be required by law.
   c. Right to a prompt hearing, as described in section V.d.2.c.
   d. Right to request, with satisfactory explanation, nonparticipation of any members of the Honor Council. These requests shall be reviewed by the Honor Council as a whole, and a majority vote of a quorum of the Council in favor of proceeding with the hearing is required in order to proceed.
e. Right to be assisted or represented at the Honor Hearing by a Wake Forest School of Medicine student of his or her choosing. This representative may not be a member of the Honor Council.

f. Right to present a statement in his or her own defense or decline to testify at the Honor Hearing.

g. Right to call and question, directly or through his or her representative, witnesses during the Honor Hearing. The accused will give the designated Investigator the names of witnesses he or she would like to call for questioning at least 48 hours prior to the hearing. The Investigator will notify the Chair of the Honor Council, who is responsible for notifying witnesses that they are being called to testify.

h. Right to have his or her innocence judged solely on the evidence and testimony presented during the Honor Hearing, though a history of prior offenses can affect sanctioning.

i. Right to appeal decisions to SPARC on the grounds of procedural unfairness or perceived bias.

F. Rights of the witnesses

a. Any student who has reported or is a witness in a hearing regarding an alleged violation of the Honor Code shall have the following rights:

b. Right to have testimony given in an Honor Code hearing used only for the purposes of the Honor Code or SPARC proceedings, except when otherwise required by law.

c. Right to remain anonymous to the accused student until the time the accused is informed of the scheduled date of the hearing.

d. Right to be protected from retaliation for participating in the Honor Code process. Any student who retaliates against an individual who has participated in and Honor Code process will be held in violation of the Honor Code.

G. The Honor Hearing

1. Participants

a. A quorum of council members is required to hold a hearing. A quorum will be defined as greater than half the number of voting members. Therefore, five voting members (excluding the Investigator) must be present prior to the election of first year students, and seven voting members must be present following their election. A hearing will be delayed until such time as these members are available.

b. Honor Hearings are closed hearings unless the accused student requests an open hearing.

c. In a closed hearing, only the following people are to be present:

   i. accused and his or her designated representative;
   ii. members of the Honor Council;
   iii. Investigator for the case;
   iv. witnesses, allowed one at a time and only during their own testimony;

d. In an open hearing, all members of the Wake Forest School of Medicine may be present. The general public and members of the press or media are not permitted to be present.

2. Records of proceedings

a. A formal record of all proceedings of the Honor Hearing, except the deliberations of the Honor Council, shall be kept in a locked file in the Office of Student Affairs for a period of six years from the date of the Hearing, and then destroyed.
b. The formal record of proceedings shall be in the form of an audio or video recording created by the Secretary of the Council.

c. These recordings shall be the sole property of the Wake Forest School of Medicine.

d. Access to these recordings shall only be allowed with joint permission of the Chair of the Honor Council and the Deans, unless required by law. The recordings will be available to SPARC if the student was determined by the Council to have violated the Code.

3. Hearing procedures

a. The Chair of the Honor Council shall call the Hearing to order, reminding those present that in an Honor hearing the members of the Wake Forest School of Medicine community are bound to honesty and integrity, and that all details of the hearing are to remain confidential.

b. The Chair shall read the formal statement of charges.

c. The Chair shall call for the presentation of evidence by the Investigator in summary format.

d. The Chair shall call for the presentation of evidence by the accused in summary format. Questioning of the accused will then occur by the Investigator, followed by members of the Honor Council.

e. The Chair shall call for the testimony of witnesses as called by the Investigator. Each presentation is followed by a period of time set aside for questioning by the Investigator, the accused and his or her representative, followed by members of the Honor Council.

f. The Chair shall call for the testimony of witnesses as called by the accused. Each presentation is followed by a period of time set aside for questioning by the accused and his or her representative, the Investigator, followed by members of the Honor Council, in that order.

g. The Chair shall call for clarifying remarks and final questions.

h. Conclusion of the Honor Hearing. All present, including the Investigator, are dismissed, with the exception of the Chair and members of the Honor Council.

H. Deliberations

It shall be the duty of the members of the Honor Council to determine if it is more likely than not that the accused student has committed the action of which he or she is accused and that such actions constitute a violation of The Code.

I. Decision and Reporting

1. Upon completion of the deliberations, all present members of the Honor Council shall vote on a verdict. A majority of members must return a verdict of guilty in order for the student to be found responsible for a violation of the Honor Code.

2. Immediately following the Honor Council’s decision and, if applicable, determination of recommendations for disciplinary actions, the Honor Council Chair will notify the accused student of the Council’s decision and the next steps that will take place according to the verdict.

3. If the Honor Council has decided that a violation of the Code has occurred, a formal written report shall be made to the Deans by the Honor Council Chair which includes the name of the student who was found in violation of the Code, the infraction(s) committed, a brief summary of the events surrounding the violation, the Honor Council’s decision and a recommendation for disciplinary action. This notification will be hand delivered to the Dean or their delegate before the end of the second business day following an Honor Hearing.
4. If the Honor Council has decided that the student has not violated the Code, the charges against the accused shall be dropped. A written report to the Deans by the Honor Council Chair will relate the events of the hearing, but will not include the names of the accused or any other involved students. This report will be given to the Dean before the end of the second business day following an Honor hearing. The Chair will also send this report to the Council’s faculty advisor. The Chair will inform the assistant director for student affairs of the student’s identity. The assistant director for student affairs will maintain a file regarding previous investigations and will report to the Deans and the faculty advisor if a student found responsible for a code violation has had prior accusations of violations of the Code. The Deans will then determine whether additional action is warranted.

5. Following the resolution of a formal allegation, regardless of the method of resolution, the Chair reserves the right to inform the witnesses that their concerns were addressed through the Honor System. Faculty inquiries addressed to the Council concerning the outcome of a case will be referred to the Deans.

J. Policy for Student Disciplinary Procedures

If the Honor Council has determined that a violation of the Code has occurred, the Dean will review the Honor Council’s findings and may refer the case to SPARC and the case may be heard as defined in the policy for SPARC, which can be found in the yearly WFSM Bulletin through the eWake website.

VI. Student Professionalism and Academic Review Committee (SPARC)

A. Decision Regarding Sanctions
   At the discretion of the Deans, the SPARC shall be the body to whom recommendations regarding sanctions will be made by the Honor Council in the case that a student is found responsible for a violation of the Honor Code. SPARC will then review the case and issue a decision regarding sanctions.

B. Composition
   The SPARC is a standing committee of the School of Medicine appointed by the Dean. Members representing both the basic science and clinical faculty serve overlapping terms to provide continuity among Committee Members.

VII. Faculty Involvement

A. Faculty Support
   The cooperation and support of the faculty are essential in carrying out the spirit and principles of the Honor Code. They, too, benefit from the freedom created by living in a community of honesty and trust. Likewise, the faculty has individual and corporate responsibility to uphold the Honor System.

B. Faculty Rights
   All reports of suspected Honor Code violations shall be dealt with under the Honor System as described herein. The reporting faculty member shall have the same rights, obligations, and responsibilities under the Honor System as any student reporting a suspected violation. The only penalties or sanctions which may be imposed against an accused student are sanctions imposed by SPARC.

C. Reducing Temptations and Misunderstandings
   The faculty shall use their best efforts to minimize the potential for Honor Code violations. For example, the faculty shall
   a. give clear directions and instructions concerning course requirements and the limits of acceptable collaboration in coursework.
   b. carefully maintain the security of examinations.
c. clearly explain whether old examinations may be used by students in preparing for current examinations, being sure to make such old examinations equally accessible to students when their use is permitted.

d. reduce the temptation to pass information about exams from class to class by changing the content of exams from year-to-year as much as is practical. This includes exams for both the basic science courses and clinical rotations.

VIII. Revision of the Honor System

A. Petition for consideration of change to this document may be submitted in writing to the Chair of the Honor Council by any student or faculty member.

B. A three-quarters majority vote of the Honor Council is required to pass the proposed changes. Revisions to the Honor Code will be submitted to the Dean for final approval.

C. Any proposed changes in the Honor Code and System will be sent to all classes via e-mail attachment for student body evaluation and input, no less than one week prior to the official Council vote.

D. Copies of the most current version of The Honor Code and System will be kept in the Office of Student Services. Current versions will also appear on the Honor Council portion of the SGA website, the Educational Services portion of the eWake website, and in the Wake Forest School of Medicine Student Bulletin which is revised and published annually.

Appendix I.

To be attached to any quizzes or exams per section III.C:

“I acknowledge that the principles of the Honor Code and Honor Pledge pertain to this assignment. On my honor, I pledge that I will neither give nor receive unauthorized assistance or information on this assignment and I will not tolerate such conduct on the part of others. My signature or electronic submission of this assignment symbolizes my awareness and acceptance of the fact that this and all other academic activities at Wake Forest School of Medicine are governed by its Honor Code.”

Appendix II.

The Honor Pledge of the Wake Forest School of Medicine

“Physicians are called to the highest standards of honor and professional conduct. However, our responsibility to patients, their families, faculty, and staff precedes the receipt of a medical degree. This responsibility begins upon matriculation as a medical school student. As such, the students of Wake Forest School of Medicine commit to embody the virtues and uphold the standards as described in the Wake Forest School of Medicine Code of Honor and Professional Conduct throughout the duration of enrollment.

As a Wake Forest School of Medicine student, I pledge to demonstrate behavior which is considered appropriate for a career in medicine. Appropriate behavior includes, but is not limited to, honesty, trustworthiness, professional demeanor, respect for the rights of others, personal accountability, and concern for the welfare of patients. In these areas, I, as a medical student, will endeavor to live by and uphold The Code”

Code of Honor and Professional Conduct Approved August 15, 2015
**MD Conflict of Interest Disclosure**

As course coordinators/clerkship coordinators are preparing your schedules, we would like to ask you to submit any potential conflicts of interest you foresee during your courses, clerkships, and rotations.

Conflicts of interest important to consider include but are not limited to:

- You are an immediate family member of the individual.
- You are in a consensual relationship with the individual.
- You have a personal financial relationship with the individual.
- You have received medical or mental healthcare from the individual.
- Any other issue not included in the above-mentioned situations you may perceive as a conflict (additional information about the nature of the perceived conflict may be requested under this circumstance).

For further details, please see the [Conflict of Interest Related to Student Assessment policy](#).

To report a Conflict of Interest, CLICK HERE. Please provide the full name (first and last) of any faculty or house officer in a department(s) or section(s) with whom you perceive as having a conflict of interest. This information will be forwarded to the Senior Associate Dean of Healthcare Education and his/her designee (such as course coordinators and directors) for consideration and, if necessary, management.
The Grading System

The practice of medicine is a continual test of a person’s will and ability to perform at the highest level. Students are expected to develop a habit of excellence and set personal standards of achievement that will provide the highest quality of patient care and bring credit to themselves, to their profession, and to their alma mater. The school’s grading system reflects these goals.

Grading System for Years 1 & 2
Pass
Fail

Grading System for Years 3 & 4
Honors
High Pass
Pass
Low Pass
Fail

Note: “Fail” (F) is not a passing grade.

The criteria for each grade level should be specified prior to the start of each course or clerkship.

Mechanics of Handling Grades
Final grades are recorded in the Office of Student Records. Periodic progress reports are built into the system so that students have an opportunity to receive feedback regarding strengths and weaknesses. However, if students feel uncertain about their progress in a given area, they should contact the faculty member responsible for student evaluation for that course. If that is not satisfactory, they should contact the Associate Dean for MD Program Academic Affairs or the Director of Academic Affairs.

Class Standing
Actual grades received and class rankings are recorded in the student record maintained in the Office of Student Records. Class rank is calculated at the end of Year 3. Class rank will no longer be calculated beginning with the Class of 2019.
Policy on Final Grade Submission for Pre-Clinical & Clinical Year Courses/Clerkships

Policy Statement

It is the expectation of the Medical School that final grades be submitted for recording in the student record system within 28 days from the end date of the clinical or pre-clinical course or clerkship activities.

Reasons for Policy

Ensuring the timeliness in which medical students are informed about their final and comprehensive performance in a course and/or clerkship is an important element for students to self-assess their progression in the medical school curriculum. In addition, the submission of grades in a timely manner ensures verification of grades for transcript deadlines, such as ERAS (Electronic Residency Application Service) submission, graduation, and enrollment verification. Finally, it is a Liaison Committee on Medical Education (LCME) accreditation requirement that grades be submitted no later than 6 weeks after the end date of the course/clerkship for official reporting purposes.

Failure to meet the standard will result in notification to the Dean, Associate Dean for MD Program Academic Affairs and the Chair of the involved department on day 29. Late grade reports will be taken into consideration upon the annual review of course and Course Director performance evaluations (“dashboards”) by the Associate Dean for MD Program Academic Affairs.
Policy on Narrative Description of Medical Student Performance

Policy Statement
It is the policy of the School of Medicine that a narrative describing a student’s performance be submitted by each Course/Clerkship director with the student’s final grade in the course/clerkship. The narrative must be submitted in accordance with the Policy on Final Grade Submission for Pre-Clinical Courses & Clinical Courses/Clerkships.

Policy
A narrative description of medical student performance is required as a part of the student’s final assessment in the following circumstances:
When the course or clerkship (including any 4th year rotations) are required for graduation, AND
When the student-teacher interaction occurs in a way as to allow such an assessment to be done (e.g., when small group activities are part of a course).

A course director may submit a request to the Associate Dean for MD Program Academic Affairs to be considered to be exempt from this policy, specifying the educational/evaluation reasoning behind their request. All such requests require review and approval by the Undergraduate Medicine Education Curriculum Committee (UMECC).
Policy on the Provision of Mid-Term Formative Feedback

Students enrolled in required courses/clerkships are provided feedback continuously throughout the course by a variety of means (test/quiz performance, small group feedback, faculty/resident feedback, etc.). Students enrolled in required courses or clerkships of four weeks or more in duration must be provided formative feedback by at least the mid-point of the course.

For Courses in Years 1 & 2:
For courses with goals pertaining only to the acquisition of knowledge, the student will be provided a numerical mid-rotation feedback on their performance. Students who are at risk of failing a course will meet with the course director and either the Assistant Dean for Basic Science Curriculum or the Assistant Dean for Educational Strategy and Innovation, who may refer the student for Academic Advising through the Office of Student Affairs, or other appropriate support services.

Courses with goals beyond acquisition of knowledge, for example goals related to teamwork or communication skills, will provide students with formative feedback at least by the midpoint of the course. This evaluation will consist of a narrative summary of the student’s performance.

For Clerkships and Required Course in Years 3 & 4:
The Commons Clerkship Mid-Rotations Feedback Form has been provided to students and clerkship/required course directors. It contains a self-assessment from the student and formative feedback from the course director. This form will be completed in a face-to-face session with the course/clerkship director (or faculty designee) and uploaded into the student’s file under the mid-rotation feedback tab for the corresponding course no later than the week after the midpoint of the clerkship/course (example: week 3 of a 4-week clerkship/course). Clerkship and course directors/coordinator will specify the process for completion of this form at the beginning of the clerkship.

The Mid-Rotation Feedback Form for Years 3 & 4 is available in the student learning management system.

For Longitudinal Courses throughout the Curriculum:
For longitudinal courses in Years 1-4, a scorecard and/or narrative formative feedback will be provided to each student around the midpoint of the course by the Course Director (or faculty designee).
Policy on Satisfactory Academic Progress (SAP)

PURPOSE

Established standards of performance and behavior in each course, clerkship, and rotation of medical school, as well as in the overall curriculum, are essential components of a quality medical education. Progress towards graduation is based on the overall conduct of the student, passage of USMLE Steps 1 and 2, and demonstration of academic performance and professional behavior that meets or exceeds the standards described in the following paragraphs. Students must demonstrate, to the satisfaction of the Wake Forest School of Medicine, that they are fit, both academically and professionally, to be a Wake Forest School of Medicine graduate.

SCOPE

This policy applies to undergraduate medical education (MD) program students at Wake Forest School of Medicine.

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

C. Benchmarks: Tests/assignments/evaluations that have been identified by the Course Director or Clerkship Director as essential measures of satisfactory progress. Students must pass (or successfully remediate) all benchmarks in order to pass the course/clerkship.

D. Gateways: Foundational educational experiences that must be passed in order to proceed in the curriculum. Students must pass all Gateways to advance in the MD program. Students who fail a Gateway must demonstrate successful remediation of the Gateway before proceeding in the MD program. Courses, clerkships, and required curriculum elements are Gateways.

POLICY GUIDELINES

A. Standards for All Years

1. Failure of 1 Benchmark
   a. Student must meet with the Course Director or Clerkship Director to identify learning issues for remediation of the Benchmark.

2. Failure of 2 Benchmarks
   a. Student must meet with the Course or Clerkship Director, the relevant Associate Dean (either the Associate Dean for Basic Science Education or the Associate Dean for Educational Strategy &
Innovation), and the Associate Dean for Student Affairs, for directed support regarding remediation of the Benchmark.

3. Failure of 3 Benchmarks

   a. Student must meet with the Course or Clerkship Director, the Associate Dean for Student Affairs, and the Senior Associate Dean for Undergraduate Medical Education for directed support regarding remediation of the Benchmark.

   b. Following the failure of 3 Benchmarks, failure of any subsequent Benchmarks may result in a review with the Senior Associate Dean for Undergraduate Medical Education.

4. Final course grades and final grades from clerkships and rotations are used as Gateways in the MD curriculum.

   a. Failure of any Gateway will result in review of student performance by the Student Professionalism and Academic Review Committee (SPARC) for consideration for a change of status to Warning, Probation, or dismissal from the School of Medicine. In the event a student is permitted to remain in the MD program following a review by SPARC, the student must successfully demonstrate remediation to competency before proceeding in the MD program.

5. Students who require remediation to competency for a failed Benchmark or Gateway are not eligible for a grade higher than Pass in that Gateway.

B. USMLE Step 1 and Step 2 Exams

1. The USMLE examinations are national standards for student performance and are considered by the School of Medicine in determining student competency in the MD program. USMLE Step 1 and Step 2 examinations are considered Gateways for progression through the MD Program.

   a. Students must complete the USMLE Step 1 exam by the Step 1 Completion Deadline, as specified on the academic calendar, to begin the Immersion Curriculum (the Year 3 Clinical Clerkship Curriculum).

   b. Likewise, students must complete the USMLE Step 2 examination(s) by the Step 2 Completion Deadline, as specified on the academic calendar.

   c. Successful completion of USMLE Step 1 and Step 2 Clinical Knowledge (CK) is required in order to graduate from the MD program.

2. Absent compelling circumstances, students will be allowed no more than three (3) attempts to pass each of the USMLE Step exams. Failure to pass a Step exam after three (3) attempts will result in referral to SPARC for consideration of dismissal.

C. Requirements for Graduation

1. Successful completion of all required components, competencies, and Gateways of the curriculum in Years 1-4.

2. Satisfactory completion of the Procedures Courses.

3. Receipt of passing scores for USMLE Step 1 and USMLE Step 2 CK.

4. Satisfactory demonstration of appropriate professional conduct.
5. The normal time frame for completion of required course work for the MD degree is 4 academic years.

   a. Students matriculated into the MD degree program may at times seek an approved Leave of Absence to pursue an advanced degree. The normal time frame for completion of required course work for the MD degree plus an additional doctorate degree (e.g., PhD, EdD) is 7 years. The maximum time permitted for completion of the MD degree plus an additional doctorate degree is 9 years. The normal time frame for completion of the MD degree plus an additional master’s degree (e.g., MS, MA) is 6 years. The maximum time permitted for the completion of the MD degree plus an additional master’s degree is 8 years.

   b. Due to academic, administrative, medical, or personal difficulties or scholarly enrichment activities, a student may require additional time for completion of degree requirements. In such situations, an academic plan may be established for the student that departs from the normal course of study and that may require the repetition of all or a part of a year of study (i.e., subsequent to incomplete or unsatisfactory course work or an approved leave). To be making Satisfactory Academic Progress, students ordinarily must complete the first two years of the curriculum by the end of the third year after initial enrollment.

D. SAP and Leaves of Absence

   1. A student may be granted an academic, administrative, medical, or personal leave of absence.

      a. The period of leave for which the student has been approved may be excluded from the published maximum time frame in which an individual student will be expected to complete all requirements of the degree program.

      b. **However, unless approved by the Dean, Wake Forest School of Medicine, students will not be allowed to take more than 10 years from the time of matriculation to complete the requirements for the MD degree, inclusive of leaves of absence.**

      c. A student who is not on-track to complete the requirements for the MD degree by the 9th year following matriculation will be contacted by the Registrar and required to meet with the Senior Associate Dean for Undergraduate Medical Education (or designee).
Policy of the Student Professionalism and Academic Review Committee (SPARC)

The Student Professionalism and Academic Review Committee (SPARC) is a standing committee of the School of Medicine with membership comprised of both elected faculty members and faculty appointed by the Dean. Members serve overlapping terms to provide continuity among the committee. The SPARC leadership is elected by the committee.

The SPARC is charged with reviewing and approving the continuation of medical students in the curriculum, reviewing and approving students for graduation, and reviewing and making decisions regarding students with unsatisfactory academic or professional performance.

The Associate Dean for MD Program Academic Affairs and the Associate Dean for Student Affairs will, at least annually, present to the SPARC a list of students for a determination regarding eligibility for continuation in the curriculum and/or graduation. This list shall include the academic and professional standing of these students.

In cases referred to the SPARC involving students with unsatisfactory academic or professional performance, the Associate Dean for Student Affairs will provide to the SPARC any and all available information regarding the student’s professionalism issues, past, present and pending. The Associate Dean for MD Program Academic Affairs will do the same with respect to any academic issues. The SPARC may also obtain additional information from others that it may deem relevant to its review of the concern(s), including but not limited to, opinions of course coordinators and clerkship or rotation directors. The SPARC will decide what information is relevant to the case at hand. The Associate Deans will not be present during any deliberation; however, the SPARC may, at its discretion, consult these Deans during deliberations. The student will be invited to speak and to present relevant information on his or her own behalf. Students who elect not to appear are required to submit a written statement prior to the SPARC meeting when their case will be reviewed. While the student whose performance is being reviewed may have advisors, legal counsel and other individuals available to lend support throughout the process, only the student will be permitted to meet with the SPARC.

Following review of any concern referred to the SPARC, the SPARC will select an outcome or outcomes from the following options:

1. Student remains in Academic/Professional Good Standing
2. Student is placed or remains on Warning (Academic/Professional Good Standing)
3. Student is placed or remains on Probation (Not in Good Standing)
4. Student is dismissed
5. Other alternatives, such as community service, counseling, Year 4 course selection by the Director of Clinical Curriculum, etc., as deemed appropriate by the SPARC

The decisions of the SPARC will be recorded in the minutes of each meeting and transmitted to the Associate Dean for Student Affairs and the Associate Dean for MD Program Academic Affairs. All written communication with and notifications to students regarding the SPARC’s review and decision will be conveyed to the student within 2 business days by the Associate Dean for Student Affairs (or his/her designee) and will be delivered to the student's medical center mailbox as well as their Wake Forest e-mail account. A copy of the correspondence will also be sent to the Office of Student Records.

Students permitted to continue in the curriculum will do so with the understanding that any additional concerns regarding the student’s academic performance or professionalism will require an additional review by the SPARC.

In the event of a dismissal decision, the student has 7 business days to appeal that decision. Upon receipt of a written appeal of a dismissal decision, the appeal will be reviewed in accordance with the Student Appeal of Dismissal Policy. A student who chooses to appeal a dismissal decision will be suspended from all activity in the curriculum during the
appeals process. Once suspended from activity, the student will not retain his/her identification badge or access to his/her institutional e-mail account and must turn in the School-issued laptop computer within 24 hours following notification of the SPARC dismissal decision.

The Associate Dean for MD Program Academic Affairs and/or the Associate Dean for Student Affairs may place a student on interim suspension when there is reasonable cause to believe that the student has engaged in or threatens to engage in behavior that poses a significant risk of harm to the safety or security of themselves, others, or to property, or directly or substantially impedes the activities of members of the institution’s community, including employees, other students, or visitors. Upon a student’s request, a review of the interim suspension shall be held by the Dean of the School of Medicine (or his/her designee) within three working days of the interim suspension to determine if the suspension should continue until a review of the concern and decision on the outcome is made by the SPARC. The interim suspension will not prohibit the student from speaking with the SPARC and presenting information on his/her behalf, although arrangements may be made by the School of Medicine to allow this to occur remotely.

**USMLE Step Exams**
The SPARC will review failures of USMLE Step 1 or either part of USMLE Step 2 in accordance with the SAP policy.

**Warning**
A student may be placed on Warning by the SPARC or by the relevant Associate Dean (or his/her designee), without referral to the SPARC. The student will remain in Good Standing while on Warning.

A student who is placed on Warning will remain on Warning for a period of twelve (12) months. However, the SPARC will review the academic/professional performance of the student 6 months into the Warning period to determine whether the student’s performance supports an early termination of Warning.

**Probation**
A student who is placed on Probation will remain on Probation for a period of twenty-four (24) months. In addition, the student will not remain in Good Standing while on Probation. However, the SPARC will review the academic/professional performance of the student 12 months into the probationary period to determine whether the student’s performance supports an early termination of Probation.

A student who is placed on Probation will no longer be eligible for the following for the duration of the probationary period:

- Service on the SGA
- Participation on external rotations (extramural and international)
- Serving as a representative of the School either internally (e.g. serving as a voting member on a curriculum committee) or externally (e.g. serving as an OSR representative)
Policy on Medical Student Appeal of a Gateway Grade

Students will be evaluated on a continuous basis in both cognitive and non-cognitive performance by the Course/Clerkship Director, and a grade will be assigned and distributed to the student. In the event that a student has concerns about summative comments or a Gateway grade (as defined in the Policy on Satisfactory Academic Progress), the student has 10 days from the time a grade is released to request a meeting with the Course/Clerkship Director. If this meeting does not resolve the student’s concerns, the student may appeal the assignment of a Course/Clerkship grade or summative comments received to the Associate Dean for MD Program Academic Affairs.

Appeals must be filed in writing with the office of the Associate Dean for MD Program Academic Affairs within 10 days following the required meeting with the Course/Clerkship Director. A copy of the appeal must also be provided to the Office of Student Affairs. The Associate Dean for MD Program Academic Affairs will review the appeal and issue a decision. In the review of the student’s appeal, the Associate Dean for MD Program Academic Affairs may discuss the appeal with the Course/Clerkship Director and/or others. The student will be informed, in writing, of the decision within 10 days by the Associate Dean for MD Program Academic Affairs, and the decision will be final. A copy of the final decision will be forwarded to the Registrar in the Office of Student Records.
**Computer-Based Exam Policy**

The Computer-Based Exam Policy requires students to comply with the following requirements:

- Students must secure ALL personal effects (includes bags/backpacks, cellphones, smartwatches, etc.) in their assigned locker in the medical education building prior to the start of the exam.
- Students should arrive in the exam room **15 minutes** prior to the start of the exam unless otherwise specified by the Evaluations staff in the testing instructions provided prior to the exam date. Students must complete the exam compatibility check, restart their computers, and complete all network security and software updates **prior to test day** to ensure that computers are working properly on the day of the exam.
- All students, including those with accommodations, must arrive ON TIME for all examinations.
- Any students arriving more than 10 minutes late will be required to meet with a proctor prior to starting the exam.
- The time allocated to complete an exam will **NOT** be extended due to late arrival, barring extenuating circumstances, at the discretion of the proctor.
- Students distracted by background noise may bring soft-foam earplugs (with no wires) for use during testing, in accordance with the testing regulations for USMLE Step exams: [http://www.usmle.org/bulletin/testing/#PersonalItems](http://www.usmle.org/bulletin/testing/#PersonalItems)
- No electronics are allowed in the exam room with the exception of laptops used to take the exam. Smartwatches may not be worn or brought into the exam room.
- In an effort to maintain a quiet testing atmosphere, students should enter and leave the testing area as quietly as possible when taking breaks. Students who bring snacks and/or drinks into the exam are asked to open beverage cans and remove food from noisy wrappers prior to the start of the exam to lessen noise distractions to their classmates.
- Any student wishing to take a break during an exam must log in and log out of the exam room.
- Only **ONE** student may be out of the exam room at a time.
- Breaks are limited to **10 minutes** out of the exam room.
- From the time a student begins an exam until he/she completes it, the student must remain in the same building and on the same floor in which the exam is being administered.
- All exams are governed by the Honor Code.

**Lecture Recording**

Wake Forest School of Medicine recognizes that there may be some circumstances where it may be inappropriate to record lecture content using the lecture capture system. When Academic Affairs or faculty determine that content is inappropriate for recording (for example, due to patient privacy, confidentiality, or content covered is directly related to actual assessment questions) students are prohibited from making audio or video recordings or photographs during the session. Disclosing such confidential material is an honor code violation.

**Note Exchange**

Wake Forest encourages student collaboration and discourse within our learning communities and between classes to share study materials and resources to enhance learning and acquisition of knowledge and competency. However, actual assessment questions on tests and quizzes are confidential and should not be shared in any format between classes. Disclosing such confidential material is an honor code violation.
**Dress Code Policy**

The Dress Code Policy requires students to comply with the following requirements:

- Clothing should be clean, neat, properly fitting, and not excessively worn.
- Revealing, tight-fitting, or otherwise provocative clothing should not be worn. Specifically, short skirts, low neck lines, and any amount of exposed midriff are inappropriate.
- Visibly wear your WFSM identification at all times. Do not use items to cover your name or face.
- Scrubs are generally intended for procedurally-based specialties or when spending the entire night in the hospital. They still should be clean and fit appropriately.
- Body odor and heavy scents are not allowed. No perfumes, colognes, or aftershave should be worn in the clinical setting as per WFBH institutional policy.
- Nails should be kept neat and trimmed per OSHA requirements.

Additional policy guidelines specific to patient care areas, standardized patient assessments (SPA), and observed structured clinical evaluations (OSCEs):

- Collared shirts for gentleman. No T-shirts of any type should be worn as an out garment. If a T-shirt is worn under scrubs, it should not have visible logo or slogan on it.
- Blue jeans or shorts are never acceptable.
- Closed-toe shoes are required in the Emergency Department, Operating Room, Labor and Delivery, and other areas where there is a high risk of blood, body fluid, or sharp exposure. Flip flops are never acceptable. Shoes should not be excessively worn or soiled.
- A white lab coat should be white, clean and not torn.
- Hair should be clean and neatly cut.
- An unshaven appearance is unprofessional, so shave daily. Beards and mustaches should be clean and neatly trimmed.
- Facial piercings are inconsistent with most patients’ expectations of professional appearance (J Gen Intern Med. 2005:20:312-313) and hence are discouraged.
- Religious-based exceptions to any of the above will be reviewed on a case-by-case basis.
Policy on Medical Student Supervision During Clinical Activities

Wake Forest School of Medicine is dedicated to providing an educational experience of the highest quality for medical students to produce outstanding physicians of tomorrow, while ensuring an environment of patient and student safety. It is recognized that the amount of supervision required will vary depending upon the acuity and complexity of the patient’s condition, as well as the training and experience of the medical student involved in the patient’s care.

While completing clinical activities and clerkships, students should be incorporated as an integral member of the healthcare team. Students should be permitted to participate in patient care while completing assigned course work. Medical students should also be provided opportunities to collaborate and work with different members of the healthcare team, to include inter-professional teams with members of professionals and staff from a variety of disciplines. Specific guidance and information about the student’s level of responsibility, approved activities and expected procedures may vary and will be provided in individual clerkships and courses.

Clinical Supervision:

A medical student should be supervised during all duty and call hours by a qualified faculty and/or house staff (i.e. interns, residents, and fellows) physician, or assigned credentialed allied healthcare provider. Students will be provided a reliable means (such as pagers provided by the medical school) for rapid communication with faculty and house staff physicians, and allied healthcare providers, to ensure both student and patient safety.

During the clinical phase of the medical curriculum, supervision should foster an environment of progressive responsibility based on the acuity/complexity of the patient and/or procedure and the student’s experience and level of training.

Supervision should foster a safe learning environment for students, ensuring feedback to the student to allow for growth in clinical skills while also facilitating formative and summative feedback.

Medical students are permitted to enter pending orders in the electronic medical record. While all pending orders can be seen in the medical record, the orders must be reviewed and signed by a House Officer or faculty member before the order is acted upon and becomes an active part of the record.

Students on clinical clerkships/courses may enter information into the medical record of the patient for educational purposes with the approval of the faculty physician and consistent with the Medical Center Policy on Student Documentation in the Medical Record (MC-42). Faculty will provide feedback on the presentation, style, completeness and utility of information entered by the student. Information entered by medical students is retained as part of the medical record but is clearly identified as being authored by a medical student and for educational purposes only.

Procedure Supervision:

- Medical students may be assigned to additional patient care opportunities/services by their faculty or house staff physician or clerkship/course director.
- A faculty or house staff physician should supervise all procedures in which a medical student is involved. The degree of supervision will take into account the complexity of the procedure, potential for adverse events, the demonstrated competence level of the student in order to ensure patient and student safety, and patient preferences.
- A faculty physician or course/clerkship director may assign an allied healthcare provider as a supervisor of teaching activities, but must ensure:
  - The level of supervision is appropriate for the student’s level of responsibility.
  - The procedure falls within the supervisor’s scope of practice, (example: phlebotomist for phlebotomy, nurse for IV, etc.)
- Continued monitoring of the students’ supervision on the clinical service to protect student and patient safety.
Policy on Requesting an Alternate Educational Site or Curriculum Assignment

PURPOSE

The purpose of this policy is to establish standards for Wake Forest School of Medicine (WFSM) undergraduate medical education (MD) students to request an alternate educational site.

SCOPE

This policy applies to all WFSM MD students.

DEFINITIONS

A. Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES

Wake Forest School of Medicine MD Program offers the opportunity for medical students to complete Immersion Phase (Year III) clerkships either in Winston-Salem or in Charlotte. All students are able to complete clerkships in Winston-Salem in order to complete graduation requirements. Students can apply to complete Immersion Phase (Year III) clerkships in Charlotte during the registration period for clerkship location during the Foundation Curriculum (please see Requesting an Alternate Educational Site - Curriculum Assignment Procedures - MD Program - WFSM). Students are informed that they may not receive their top choice in registration for Immersion phase clerkships and swaps of location between students are not allowed.

After assignment into a given location for clerkship(s), students may request an alternative clinical site if need arises. Requests in changes of clerkship location should be made to the Registrar and will be reviewed by the Associate Dean for Clinical Education, Associate Dean of Student Affairs, and site leadership teams.

REVISION DATES

6/2020; 2/2021
Policy on Medical Student Contact Hours for the Pre-Clinical Curriculum

Purpose
Obtaining a quality education is the primary goal of medical students. This policy outlines limitations on contact hours to allow students to maximize educational benefits and limit fatigue which may impair the student’s ability to learn. The policy will include oversight of all aspects of the pre-clinical educational experience of a medical student. For information regarding oversight of clinical duty hours for medical students, refer to the Policy on Clinical Duty Hours for Medical Students on Clinical Clerkships/Courses.

Policy
Students will be provided a sound educational experience that is carefully planned and balanced with concerns for patient safety and student well-being. The learning objectives of each educational experience cannot be compromised by excessively scheduled contact hours in the pre-clinical educational experience or clinical assignments in the clinical educational experience. The oversight of this policy will be the responsibility of the Associate Dean for MD Program Academic Affairs.

Specifics of the Policy and Procedures Pre-Clinical Education
The general structure of each preclinical course is defined by the course directors in collaboration with the Office of Undergraduate Medical Education. The content in the preclinical curriculum may be delivered via lecture, small group or team-based learning activities, simulation activities, self-directed learning, online, or laboratory-based activities. As a general guideline, the total duration of these activities should not exceed 40 hours per week, on average. Independent reading and study performed at the time of discretion of the student are not included in these 40 hours per week.

The Office of Undergraduate Medical Education will formally assess student contact hours in the preclinical curriculum as a component of the formal course evaluation process. Student contact hours will be reviewed with course directors annually.
Policy on Clinical Duty Hours for Medical Students on Clinical Clerkships/Courses

1) **General Policy Statement:** Medical student duty hours should support the educational mission of an individual clerkship/course. During clinical rotations, variation exists regarding clinical duty expectations and time commitments for rotating students. The following medical student duty hour rules are established to ensure that those hours correlate with clerkship/course goals and objectives and takes into account the effects of fatigue and sleep deprivation on a student's learning ability and health.

2) **Definitions:** For purposes of this Policy, the following terms and definitions apply:

   a. **Duty hours:** all assigned clinical and academic activities related to medical education (inpatient and outpatient patient care, administrative duties, transfer of patient care, in-house on call, and scheduled academic conferences/sessions). Independent reading and study performed at the time discretion of the student are not included.

**Immersion Phase (Year 3) Duty Hour Policy:**

1) In general, a medical student should not be required to work longer hours than interns on the same service.

2) A student may be scheduled for an average of 80 duty hours per week during a four week period.

3) Duty hours must be structured to allow a minimum of four 24-hour time periods free over a four week time period for the duration of the clerkship.

4) Duty hours may not exceed 16 continuous hours, following which students should have at least 8 hours duty free.

5) Duty hours may include overnight call or shifts. The maximum frequency of overnight call is once every third night. For students completing overnight shifts, the maximum number of overnight shifts is 5 nights sequentially. Following 5 overnight shifts, students will not be expected to return to duty hours until the next calendar day.

6) Students must be excused from duty hours no later than midnight of the night prior to a shelf or final examination.

7) Students are to be excused from duty hours on all days that have been identified as holidays on the Wake Forest School of Medicine Academic Calendar.

8) Students must discuss issues pertaining to planned days off with the clerkship/course director and coordinator in writing well in advance of the planned absence in order to obtain permission to be away from duties. For unplanned absences, students should submit an absence request as outlined in the Attendance Policy.

**Individualization Phase (Year 4) Duty Hour Policy:**

1) In general, a medical student should not be required to work longer hours than interns on the same service.

2) A student may be scheduled for an average of 80 duty hours per week during a four week period.

3) Duty hours must be structured to allow a minimum of four 24-hour time periods free over a four week time period for the duration of the clerkship.
4) Duty hours may not exceed 24 continuous hours, following which students should have at least 14 hours duty free. Periods of assigned responsibility may not exceed 24 continuous hours, with 4 additional hours for patient care continuity.

5) Duty hours may also include overnight call or shifts. The maximum frequency of overnight call is once every third night. For students completing overnight shifts, the maximum number of overnight shifts is 5 nights sequentially. Following 5 overnight shifts, students will not be expected to return until the next calendar day.

6) Students must be excused from duty hours no later than midnight of the night prior to a shelf or final examination.

7) Students are to be excused from duty hours on all days that have been identified as holidays on the Wake Forest School of Medicine Academic Calendar.

8) Students must discuss issues pertaining to planned days off with the clerkship/course director and coordinator in writing well in advance of the planned absence in order to obtain permission to be away from duties. For unplanned absences, students should submit an absence request as outlined in the attendance policy.

Anyone with a concern regarding possible duty hour violations must report the concern to the clerkship/course director. It is the responsibility of the clerkship/course director to monitor and prevent violations of the above standards. Reports of violations should be investigated by the clerkship/course director with an attempt to remedy the situation. If the situation is not remedied, the student should then report the violation to the Office of Student Affairs. Once notified, the Office of Student Affairs will then bring the report to the attention of the Associate Dean for Clinical Education and Associate Dean for MD Program Academic Affairs. The Associate Dean for Clinical Education will work with the course director/clerkship director to remedy the situation.

All students will be asked about duty work hours in the final course evaluation. Since course evaluations are anonymous, review confidential, review of this information by course directors will allow identification of potential violations that may be occurring during the course. Note that students may make an informed decision in specific circumstances to exceed these limits if they believe that doing so provides an exceptional educational experience.
1) **General Policy Statement:** The primary focus of the MD Program Foundations curriculum is to develop competence in the foundational basic science knowledge necessary for the practice of medicine as well as the clinical skills, attitudes and critical thinking necessary to be an effective part of the healthcare team when the student enters their clinical rotations. The Foundations curriculum offers a variety of learning opportunities determined by the Course Directors to be most effective for the given content. The school of medicine recognizes that adult learners have varying learning styles and many activities are not “attendance-required” in the Foundations curriculum. However, there are events that are crucial to student learning and that require direct engagement of the learner in real-time. These events are mandatory. Examples of this include all small-group instructional activities and selected large-group events deemed necessary by the Course Directors, as well as all high-stakes assessment events.

Because of the critical significance of the mandatory activities of the Foundations curriculum, attendance is required for all mandatory scheduled course activities. The policies relating to excused and unexcused absences from any course activities are outlined below.

1) **Definitions:** For purposes of this Policy, the following terms and definitions apply:

   a. **Absence:** Missing at least 1 mandatory event in one day, or being more than 10 minutes late to a mandatory event.

   b. **Excused Absence:** An absence that has been ‘approved’ in the student scheduling and absence system (SSAS) or for which the student has declared as an Administrative Day off in the SSAS.

   c. **Unexcused Absence:** An absence that has either been denied in the student scheduling and absence system or has not been submitted in the SSAS.

3) **Absences during Foundations Curriculum**

   a. All absence requests must be submitted through the SSAS system for review.

   b. Any denied requests may be appealed to the Associate Dean for Basic Science Education.

   c. Completion of missed curricular time and or activities may be required at the discretion of the Course Director.

   d. Minor graded events that are missed cannot be made up, such as a quiz or a group response question in a lab event.

   e. Students who miss a major assessment event with an excused absence will take the assessment in a timely fashion at a mutually agreed upon time with the Course Director and the evaluations team.
4) **Unexcused Absences during Foundations Curriculum**

   a. All unexcused absences will be reported by the Course Director or Coordinator to the Absence Adjudication Committee, and the student may be referred to the Student Professionalism and Academic Review Committee (SPARC).

   b. Unexcused absences may result in remediation of some portion of the course or failure of the entire course as well as a referral to the SPARC.

5) **Refer to the Student Attendance Operational Guidelines for additional details.**
**Attendance Policies for the Preclinical and Clinical Years**

Student attendance is governed by two separate policies:

Students may be excused from classes or clinical activities in order to access health services. Students will follow the appropriate Attendance Policy as outlined for planned or unplanned absences related to accessing health services.

Effects of infectious and/or environmental disease or disability on student educational activities: If exposed to an infectious and/or environmental disease, the student may be withdrawn from the appropriate courses, clerkships, or electives until he/she provides evidence that the problem has been appropriately corrected. In any case resulting in disability, the student will be referred to the Committee on Student Accommodations to decide if the student is still able to meet the Wake Forest School of Medicine Technical Standards and other requirements of the curriculum and to evaluate the reasonableness of any requested accommodations.

**Attendance Policy for Medical Students in Years 1 & 2:**

It is the student’s responsibility to be aware of the requirements of the attendance policy, including understanding which sessions are mandatory, the requirements for excused absences and the consequences for unexcused absences.

Students are strongly encouraged to attend all components of their education and training. It is expected that students will arrive punctually for courses and other school-related obligations and demonstrate respect for teachers, fellow students, and others while participating.

**Student attendance at all small group sessions is mandatory.** Small groups may include discussion or presentation sessions, team-based or case-based learning sessions, laboratory sessions, etc., as defined for individual courses.

Similarly, student attendance at all classroom sessions that include patients (actual or simulated) is mandatory. These sessions are not recorded due to concerns regarding patient privacy.

Student attendance may be required at other sessions, as indicated by the Course Director or Academic Affairs. These sessions will be marked as “mandatory” in the learning management system.

**Student attendance at all examinations is mandatory.** If, due to extenuating circumstances, a student cannot be present for an examination, the student must notify the Course Director and the Evaluations Office immediately. The student will work with the Course Director and Evaluations Office to make arrangements to satisfy the examination requirement.

I. **Policy on Excused Absences during Years 1 and 2**

   A. Approval of excused absences is at the discretion of the Absence Adjudication Committee. Students may receive an excused absence for:
      - health related reasons (Please note that a lengthy or recurrent illnesses should be corroborated physician note and may be requested)
      - compelling personal or family emergency/issues
      - death in immediate family
      - weddings where the student is a member of the wedding party or wedding of immediate family members
      - professional meetings (e.g., participant in meeting – poster, presenter, panel)
      - public service (e.g., jury duty).

   B. If a student anticipates the (non-emergent) need for an absence before a scheduled event begins:
      1. Contact should be made with the Course Director through submitting an absence request through the Online Absence Request (OAR) system at least 4 weeks in advance of the
session. (Note: The act of contacting the appropriate individual(s) in advance does not automatically guarantee that the absence will be considered as approved.)

2. Excused absences will not result in punitive measures, but work or assignments missed may need to be performed at a later time at the discretion of the Course Director. Due to the nature of some sessions, not all material or content can be replicated, performed, or made up at a later time.

3. Excused absences in excess of 4 may result in a meeting with either the Assistant Dean for Basic Science Education or Assistant Dean for Educational Strategy & Innovation.

4. The Absence Adjudication Committee will meet quarterly to review accumulated absence reports for the students in the Foundations phase of the curriculum or more frequently if needed.

C. If a student has an absence after a scheduled event has started that could not be anticipated (e.g., illness), the student should:

1. Contact the Course Director as soon as possible (preferably by email or in person).
2. The absence should be submitted through the OAR system within 24 hours.
3. As stated above, the decision to excuse absences is at the discretion of the Absence Adjudication Committee, but any remediation of absence is handled by the Course Director. Concerns can be brought by the student within 7 DAYS to the Absence Adjudication Committee for review, who will then make a final decision on whether to excuse the absence.

II. Policy on Unexcused Absences during Years 1 and 2

A. ALL unexcused absences will be tracked and monitored by the Absence Adjudication Committee.

1. After the third unexcused absence, the student will be required to meet with the Course Director.
2. After the fourth unexcused absence, the student will be required to meet with either the Associate Dean for Basic Science Education or the Associate Dean for Educational Strategy & Innovation. After the fifth unexcused absence, the student will be required to meet with the Associate Dean for MD Program Academic Affairs. The Associate Dean for MD Program Academic Affairs may refer the student to the SPARC for review.

Attendance Policy for Medical Students in Years 3 & 4:

1) General Policy Statement: Because of the critical significance of the clinical activities of the Immersion and Individualization phases of curriculum, attendance is required for all scheduled clinical or clerkship activities. An absence is defined as any time away from required clinical activities. The policies relating to excused and unexcused absences from any course or clerkship activity are outlined below. All activities during Clinical Curriculum are ATTENDANCE REQUIRED.

2) Definitions: For purposes of this Policy, the following terms and definitions apply:

a. Excused Absence: An absence that has been deemed ‘approved’ in the student scheduling and absence system.

b. Unexcused Absence: An absence that is taken by a student and is either not submitted in the student scheduling and absence system, or has been denied in the student scheduling and absence system.
1) **Policy on Excused Absences during Clinical Curriculum**

   a) Only requests submitted through the student scheduling and absence system (SSAS) will be considered by the Clinical Operations Subcommittee.

   b) Approval of scheduling requests and absences is at the ultimate discretion of the Clinical Operations Subcommittee. This includes absences during orientation events for Immersion and Individualization phases of the curriculum. Decisions will be communicated to the Course/Clerkship Director and Coordinator, as well as the student, at the earliest possible opportunity.

   c) If a student absence is necessary during the course of a rotation, all outstanding curricular activities must be completed in accordance with the goals and objectives of the course, and in adherence with the MD Program Policy on Satisfactory Academic Progress (SAP). The student will receive a grade of “Not Reported (NR)” until the coursework is completed. Please see the MD Program Policy on Satisfactory Academic Progress for information on advancement in the MD curriculum.

   d) If a student anticipates the need for a scheduling or absence request before a rotation begins:

      i) An online request should be placed through the student scheduling and absence system (SSAS) at the earliest possible opportunity. (Note: The act of submitting a request does not guarantee that the request will be approved.)

      ii) Excused absences will not result in punitive measures, but curricular activities missed may need to be completed at a later time at the discretion of the Course/Clerkship Director.

      iii) If a student wishes to appeal the decision of the Clinical Operations Subcommittee, an appeal may be made to the Associate Dean for Clinical Curriculum within 3 business days of the initial decision from the subcommittee. The Associate Dean for Clinical Curriculum will consult the student and Clinical Operations Subcommittee and make a final determination regarding the request.

   e) If a student has an absence after a rotation has started that could not be anticipated (e.g., illness or extenuating circumstance during which a student is unable to access the SASS), the student should:

      i) Contact the Course/Clerkship Director as soon as possible (preferably by phone or in person).

      ii) If clinical responsibilities have started, contact (via phone) the Course/Clerkship Director and/or Course/Clerkship Coordinator as outlined in the course/clerkship syllabus to inform them of the absence.

         iii) The absence should be submitted through the SSAS system within 24 hours of initial contact with the Course or Clerkship Director.

      iv) If a student absence is necessary on the day of an exam (shelf exam, OSCE, quiz or other), the student may be asked by the Clinical Operations Subcommittee to provide documentation, satisfactory to the Subcommittee, regarding his/her absence on that day. The exam must be completed within 2 weeks of the end of the course/clerkship.

2) **Policy on Unexcused Absences during Clinical Curriculum**

   a) All unexcused absences will be reported by the Course/Clerkship Director or Coordinator to the Clinical Operations Subcommittee, and the student may be referred to the Student Professionalism and Academic Review Committee (SPARC).

   b) Unexcused absences may result in remediation of some portion of the clerkship or failure of the entire course or clerkship as well as a referral to the SPARC.
3) **Policy for Residency Interviews during Individualization**

a) Most students will be interviewing for house officer positions during the fall of their senior year. The following policies apply to these absences.

i) Only requests submitted through the SSAS will be considered by the Clinical Operations Subcommittee.

ii) No more than 2 working days’ absence for residency interviews will be allowed during Acting Internship or Critical Care rotations, and those absences will be excused only if they are approved at least 14 days prior to the start of the rotation. Students who receive interview offers at short notice should communicate their absence needs to the Course Director to formulate a mutually agreeable plan for accommodating the absence and (if necessary) making up any additional missed time from the course. Short-notice absences would still need to be submitted in the SSAS system. A working days’ absence refers to any absence greater than 4 hours in duration.

iii) No more than 4 working days’ absence for residency interviews will be allowed for all other rotations, and those absences will be excused only if they are approved at least 14 days prior to the start of the rotation. Students who receive interview offers at short notice should communicate their absence needs to the Course Director to formulate a mutually agreeable plan for accommodating the absence and (if necessary) making up any additional missed time from the course. Short-notice absences would still need to be submitted in the SSAS system. A working days’ absence refers to any absence greater than 4 hours in duration.

iv) The student is responsible for checking with the individual Course Director to ensure that there are no additional requirements for attendance.

4) **Policy for all other absences during Individualization**

a) All other absences during the Individualization phase must comply with the above policies for excused and unexcused absences.

b) Failure to participate all scheduled days/shifts of a Year 4 rotation without an excused absence or appropriate remediation will result in no credit being awarded to the student for that course/clerkship.

**ALL OTHER ABSENCES MUST COMPLY WITH THE ABOVE POLICIES FOR EXCUSED AND UNEXCUSED ABSENCES.**

Failure to participate in the minimum number of days/shifts of a Year 4 rotation will result in the awarding of no credit to the student for that course/clerkship.

If patient care precludes you from being on time, patient care comes first.
**Inclement Weather Guidelines & Procedures**

Wake Forest School of Medicine remains open and operates continuously unless otherwise determined by the Dean of the School of Medicine. Classes and clerkship activities will be held when the school is open. In the event of inclement weather, students should call 716-4271 to obtain information regarding any schedule changes for that day. Every effort will also be made to notify students via e-mail of any cancellations or postponements. In situations where classes and clerkship activities are being held on inclement weather days, students are encouraged to use appropriate discretion and not to travel under unsafe conditions or take unnecessary risks. Any student who is unable to attend Y3 or Y4 activities due to inclement weather should notify his/her preceptor, clinical team and Course/Clerkship Director, and submit an absence request via the Online Absence Request System (OARS). Any student who is unable to attend Y1 or Y2 activities due to inclement weather should submit an online absence request for any AR or small group/workshop events and notify their facilitator and small group members. All students should review the complete Inclement Weather Guidelines & Procedures document (located on the eWake Educational Services page) for specific details on the appropriate procedures to follow on inclement weather days.
Exposure to Infectious and Environmental Hazards Policy – MD Program

PURPOSE

The purpose of this policy is to address issues related to:
- The education of medical students about methods of prevention.
- The procedures for care and treatment after exposure, including financial responsibility.
- The effects of infectious and environmental disease or disability on medical student learning activities.
- The timing of informing medical students about these policies.

SCOPE

This policy applies to all undergraduate medical education (MD) program students.

DEFINITIONS

Policy: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

WFBH: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

POLICY GUIDELINES

A. Education about methods of prevention
   1. Wake Forest School of Medicine medical students receive ongoing education, beginning at their initial orientation prior to any clinical activities, about how to protect themselves and others from exposure to infectious and environmental hazards.
      a. Following first-year orientation, medical students complete annual on-line training about Blood-borne Pathogen exposure prevention and infection control.
   2. Visiting students are contacted via email prior to their rotation to inform them about policies and procedures related to exposure to infectious disease and environmental hazards. The email instructs students to complete an online exposures orientation training module which must be completed prior to arrival.
      a. Following completion of that training, the student provides a code to the rotation coordinator as proof of completion.

B. Procedures for care and treatment after exposure
   1. All registered medical students, including visiting students, shall follow the Blood and Body Fluid Exposure Control Plan and the Infection Control Exposure Policy for Communicable Diseases (Non-Bloodborne). See “Related Policies,” below.
2. **Exposures at WFBH and Other Winston-Salem Area Facilities**
   
a. Immediately wash the affected area with soap and water or for eye involvement, flush with clean water.

b. Call Employee Health at 716-4801, Option #1, 24 hours a day.

c. If source patient is known HIV positive or you are directed by Employee Health, report to the Wake Forest Baptist Medical Center Emergency Department after hours, weekends and holidays.

d. Following exposure, students must complete an Occurrence Report located in the Employee Health online portal.

e. Follow-up testing is coordinated by Employee Health.

3. **Exposures in Facilities Outside of the Winston-Salem Area (travel time more than one hour to WFBH)**
   
a. Immediately wash the affected area with soap and water or for eye involvement, flush with clean water.

b. Follow that specific facility’s procedure for exposure.

c. Call Employee Health at 716-4801, Option #1 to report the exposure. If after hours, follow the voice mail instructions to be connected with someone to assist you.

d. Following exposure, students must complete an Occurrence Report located in the Employee Health online portal.

e. Students should follow the policy/protocol of the off-site location (if not a WFBH facility) and provide any lab results to Employee Health for documentation and follow up purposes.

f. Follow-up testing is coordinated by Employee Health.

4. **Post-exposure Evaluation and Management**
   
a. Notify Employee Health as soon as possible, regardless of the facility where the exposure occurred.

b. Employee Health or the Emergency Department practitioner determines the type and extent of exposure and coordinates assessment and testing of the source patient for HIV, hepatitis B and hepatitis C, in accordance with applicable North Carolina Communicable Disease Rules.

c. Baseline testing is obtained on the exposed individual for hepatitis B, hepatitis C, and HIV, if indicated.

d. Testing of source patient is done with appropriate consent.

e. Counseling is provided by Employee Health or Emergency Department practitioner - information about the risk of the exposure, risk/benefit of post-exposure prophylaxis (PEP) and follow-up plan.

f. Follow-up testing is arranged by Employee Health.
C. Effects on Medical Student Learning Activities

1. Students who have infectious and/or environmental exposure are assessed by Employee Health to determine their ability to return to the workplace for patient care activities.

2. Students who are considered to be at personal risk, or who might be of infectious risk to patients, are restricted from returning to patient care.

   a. The Associate Dean for Student Affairs (or designee) will work with the student and, depending on the phase of the curriculum, the applicable Associate Deans in Academic Affairs to determine alternate educational activities to replace any missed experience, or to repeat/remediate activities to replace missed educational experiences.

   b. The Office of Student Affairs will also work with Employee Health to determine methods and timing of a student’s return to patient care activities.

D. Financial Responsibility

1. Employee Health will cover any treatment-related expenses for initial visit for registered medical students who have an infectious and/or environmental exposure resulting from patient care, at a WFBH facility.

2. For exposures that occur in a facility outside of the Winston-Salem area, Employee Health will cover initial treatment related expenses incurred at an external medical facility. Employee Health will facilitate coordination of subsequent treatment, if required.

3. An Occurrence Report must be completed following the exposure. Employee Health will cover expenses for initial visit (if it occurred while delivering patient care and process for exposures was followed). The student/WFSM will be responsible for charges incurred for Post Exposure Prophylaxis, follow-up labs, treatments, and/or charges resulting from treatments/labs not specifically requested by Employee Health.

REFERENCES
Blood and Body Fluid Exposure Control Plan and Body Fluid Exposure Control Plan Effects of Infectious Disease or Disability on Student Learning Activities Policy - WFSM Non-bloodborne Communicable Diseases Exposure Plan
LCME Standard 12.8

ATTACHMENTS
N/A

REVISION DATES
1/2021
Leave of Absence Policy

A Leave of Absence (LOA) is a break in the MD curriculum from the School of Medicine that extends, or is anticipated to extend, beyond six (6) weeks and may be granted at the discretion of the Associate Dean for MD Program Academic Affairs and the Associate Dean of Student Affairs (hereinafter “the Deans”). Students requesting a leave of absence (academic, medical, administrative, or personal) must submit the request and all supporting documents to the Registrar for consideration by the aforementioned Deans. Students must submit a request for a Leave of Absence at least 35 days prior to the date they are requesting the leave to begin (but are encouraged to initiate the process sooner, if possible, to prevent delays). Exceptions may be made for unforeseen emergency and time-sensitive issues. While a student is on an approved Leave of Absence, they will be neither assessed tuition nor eligible for financial aid from the School of Medicine. Students are required to remit full payment on all outstanding balances as noted in the PeopleSoft Student Center at least 60 days prior to their projected return date. If the Leave of Absence is less than 60 days in duration, full payment must be received prior to the student’s return date. Additionally, and unless specified otherwise herein, the student will not retain his/her student status or identification badge but may retain the School issued laptop computer and their institutional e-mail account within the discretion of the Deans. Access to various institutional software systems/programs may be deactivated during the approved leave of absence.

It is important for students to understand that the medical school curriculum is designed as a cumulative process; therefore, any disruption in the continuum of the curriculum may result in the need for repeating some of or the entire curriculum, depending upon the timing and duration of the absence. Students may be required to demonstrate their ability to advance to the next level of the curriculum if absent for longer than six (6) months. Students who have been placed on Warning or Probation are granted a return to the curriculum and will return to the same standing upon return.

Any leave of absence may postpone the student’s graduation date. The curriculum will not be adversely modified to make up for this lost time. Ordinarily, a LOA will not extend beyond 1 year and will end at a time allowing the student to return to the curriculum at the same point they exited. Return after a leave of absence requires that the student has met all other requirements for progression to the level at which he/she is returning, whether or not such requirements change during the leave period. In the event of a change of policy, return to the School of Medicine requires meeting the requirement(s) of the new policy. In addition, return to the curriculum is subject to the availability of space in the appropriate medical school class. The period of leave for which the student has been approved counts toward the published maximum time frame in which an individual student will be expected to complete all requirements of the degree program. Under extraordinary circumstances as determined by the Associate Dean for MD Program Academic Affairs, the approved leave of absence time period may be excluded from the program’s published maximum timeframe.

Process for Requesting a Leave of Absence

A leave of absence, for whatever reason, may be granted at the discretion of the Associate Dean for MD Program Academic Affairs and the Associate Dean Student Affairs (hereinafter “the Deans”). Students requesting a leave of absence (academic, medical, administrative, or personal) must submit the request and all supporting documents to the Registrar for consideration by the aforementioned Deans. Upon receipt of all required documents, a meeting may be scheduled with the Deans for Student Affairs and Healthcare Education to discuss the request. Documents required to be submitted include: request form that will include the desired start date for the leave; the desired duration and/or completion date of the leave; a description of any activities to be pursued during the leave, including specific planned outcomes, if any; and, for leaves planned to pursue research of other education programs, the name(s) of any faculty supervisor(s). Where applicable and as indicated in this policy, other supporting documentation must also be submitted (for example, a letter from a treating provider, an acceptance letter to a degree program, an offer to work on a project in a research lab, or an acceptance/offer letter for a competitive fellowship). The Deans may request any additional documentation determined by them to be necessary for consideration of the leave request.

Leaves of absence are handled differently depending on the reason for the leave:

Academic

Ordinarily, a leave of absence is not granted for reason of academic difficulty. It is believed that remediation and enrichment practices to address academic difficulties will best occur while the student remains in the curriculum. An academic leave of absence is reserved solely for the purpose of retaking the Step 1 or Step 2 exam that requires the
student to be absent from the curriculum longer than one (1) month. The leave shall be for the pursuit of remedial studies to pass the Step exam, and will be granted with an academic enrichment plan for future success. The Associate Dean for MD Program Academic Affairs and the Associate Dean for Student Affairs will discuss the student’s educational standing and plan for supplemental instruction and educational enrichment. To return to the curriculum, the student must re-take the relevant Step exam. The amount of leave will be determined by the relative need for study time and ability to re-enter the curriculum at an appropriate point but may not exceed one (1) year.

Medical
A student with a health problem which limits their ability to perform as a student within the MD curriculum may be granted a medical leave of absence (ordinarily not to exceed one year) after review by the Deans. The student must submit documentation from a treating provider describing the medical concern, explaining the need for the leave of absence, and providing an opinion from the provider regarding his/her expectation that the student will be fit to return to the MD Curriculum at the conclusion of the leave of absence.

For students requesting a medical leave of absence, the Deans may request a second opinion from another provider. When seeking a second opinion, the student will be required to select a provider from a list of providers developed by the Deans. If the opinions of the treating and other provider differ, the Deans may accept the opinion of the provider chosen from the approved list of providers.

Administrative (Research Fellowship or Degree Program)
Students in the MD program (who are in good standing) who request to participate in a WFSM dual or joint degree program, pursue an advanced degree outside of WFSM, or desire to take time away from the curriculum to participate in a research project, may apply for an administrative leave of absence. The Deans will review the request and may grant approval for the leave based on the merits of the application. A student’s dual, advanced or joint degree program or research fellowship cannot interfere or occur concurrently with the School of Medicine’s MD curriculum, other than what is permitted during an approved leave of absence.

Personal
Students may request to take a leave of absence for personal reasons. A personal leave of absence enables a student to take time off, in extenuating circumstances, to address issues of a personal nature, such as, but not limited to, the death, disability or serious illness of a family member or financial crisis. The student’s request for a personal leave of absence must explain how the student expects to cope with or address the situation that has resulted in the request for a personal leave. The Deans may consider whether the student requesting the leave of absence is experiencing academic difficulties or facing possible disciplinary action when determining whether to approve or deny the requested leave.

Required Meeting with a Financial Aid Counselor
A break in medical education may have implications for student loan deferment and repayment status, and therefore, all students taking a leave of absence are required to meet with a financial aid counselor in the School of Medicine. If possible, a student considering a leave of absence should meet with a financial aid counselor before submitting the leave request.

Details of student status while enrolled in another degree program will be determined on an individual basis. This meeting must be documented in the student’s file and signed by both the student and the consulting financial aid counselor. The documentation must indicate that the student understands and accepts the financial implications of the leave of absence.

Plan for Return from Leave
The official letter granting the leave will specify a notification-of-return date, as well as any conditions to be met prior to returning. The student is obligated to notify the Registrar, by the notification date (which will be at least 45 days prior to the anticipated return), of their desire to return, and to submit any documentation required by the School of Medicine to evaluate whether return conditions have been satisfied. This written notification is necessary to assure the student’s course scheduling for that academic year. Should a student fail to notify the school or meet the return conditions, they will be withdrawn from the School of Medicine and would need to apply for re-admission. Any student granted a leave must, upon his or her return, submit a letter requesting reinstatement to the Registrar. All required documentation for a
return from leave of absence, including the Leave of Absence Return Form and physician’s statement, if applicable, must be submitted to the Registrar 35 days before the anticipated return date.

**Returning from a Medical Leave of Absence**

Prior to returning from a medical leave of absence and within the time period required above, the returning student must submit to the Registrar forms requesting return to the curriculum and documentation from a treating provider indicating the student is fit to return to the MD curriculum. The Deans may request a second opinion from another provider as previously noted. The student will be informed of the decision to restart the curriculum within 2 weeks prior to the requested date of re-entry.

**Extensions**

A leave of absence, for any reason, is generally limited to one year. Extension of a leave of absence may be granted under some circumstances, and required approval of the Deans. Students requesting an extension of a leave of absence must submit the request and all supporting documents to the Registrar for consideration by the Deans. If no extension is granted, and the student does not complete the appropriate returning paperwork in the allotted time, the student will be withdrawn from the School of Medicine.

**The decision of the Deans on any request for a leave of absence or an extension of a leave of absence is final.**

**Withdrawal**

Students who wish to withdraw from the School of Medicine must complete the appropriate form, which requires approval from either the Associate Dean for MD Program Academic Affairs or the Associate Dean for Student Affairs. Students who withdraw from the program will have the grade of W (Withdraw) assigned for each course/rotation in progress.

A student who withdraws from the School of Medicine during a semester may be entitled to a refund of certain charges. A withdrawal also affects financial aid eligibility, and could require a return of federal financial aid funds. Please see the Refund and Return of Financial Aid Funds Policy for further details.

Students will be required to meet with the following offices to complete exit procedures:

- Office of Financial Aid
- Student Financials
- Academic Applications
- Library
- Office of Student Records

Any student who has withdrawn and wishes to be considered for readmission must apply and follow all the processes and procedures of the regular admissions process. Applicants will be considered as described in the Policy on the Selection of Medical Students.
MD Student-Focused Resources

Office of Academic Affairs

The Office of Academic Affairs (OAA) promotes educational development activities and supports the students, faculty, and administration through service and research. The mission of the OAA is to foster a supportive teaching-learning environment by facilitating curriculum design and implementation, developing and implementing program and student evaluation, and conducting educational research.

Course and Curriculum Facilitation: The OAA facilitates the curriculum and its component courses and clerkships by providing essential support services for curriculum committees; topic, course, and clerkship directors; teaching faculty; and students.

Student Evaluation: The OAA supports student outcome evaluation by providing comprehensive testing services, including performance assessments.

Program Evaluation: The OAA guides the development of evaluation plans, conducts evaluations in support of the curriculum, and reports and makes results-based recommendations to committees that oversee the curriculum.

Educational Research: The OAA initiates and/or collaborates with medical school faculty in designing, conducting, and analyzing data and reporting results of educational research studies.

Services of the unit are available to all faculty members. Services from Evaluations include assisting with editing of test questions, scoring of examinations, analyzing examination data, and consulting on the interpretation of examination statistics. The OAA conducts educational research and evaluation studies and provides consultation in these areas to the central administration, departments, and individual faculty members.

Instructional design services include assistance with curricular design and individual consultation with instructors to develop and design online and in-person courses that are functional, intuitive, informative, and consistent with sound instructional design principle.

Learning Communities (Houses)

Beginning in 2013, the Wake Forest School of Medicine established Learning Communities or "Houses," in support of the education of our students. Medical students are randomly assigned to four color-coded houses with their own unique mottos. Within their House, each student is assigned a clinical skills coach with whom they will meet regularly for coaching and career advising during the first and second years. At these meetings, the coach and student discuss the student's general academic progress, study-life balance, and early career exploration. Upon transition to the clinical years, students will be assigned to an Advanced Career Advisor and will have access to a host of specialty advisors representing many of the major subspecialties. Students may connect with these advisors at any time for guidance and support. This team mentoring approach builds a solid foundation of support for medical students from day one of medical school all the way through graduation.

The mottos of each house are as follows:

Blue House: "If you're going to be a doctor, be the best."

Green House: “While we live, we serve."  

Red House: “In everything, compassion.”  

Yellow House: "We labor not for ourselves."
The goals of the Learning Communities or “Houses” are as follows:

- Fostering relationships between students and faculty
- Vertical integration of medical students across class years
- Advising, mentoring, and career planning
- Modeling medical professionalism
- Creating community service opportunities
- Social networking

Each House will plan activities according to the interests of its members and the mission of each House. The Houses occupy physical space on the 3rd floor of the new Bowman Gray Center for Medical Education to facilitate the goals of these Learning Communities.

❖ Resources for Career Planning

Advanced Career Advisors (ACA)
As students enter the clinical years of medical school, they are provided with additional support from a team of advisors whose expertise is the residency application process. They are also provided with contacts from the specialty in which they will apply for residency. ACAs provide academic and career advice, strategic schedule planning, and interviewing advice specific to the specialty of choice. The primary goal of this relationship is to provide students with resources to most effectively obtain a successful residency match.

Workshops & Other Career Resources
The ACAs, in collaboration with the Office of Student Affairs, hosts regular workshops targeting key aspects of the residency application process. Individual appointments and advising are also available for review of CVs, personal statements, and for mock interviews. A list of the various workshops offered is included below.

- Annual student organization fair
- Building a CV
- Writing a Personal Statement (informational and interactive)
- Medical Student Performance Evaluation (MSPE)
- Electronic Residency Application Service (ERAS) Q&A
- Interview Prep Informational Session
- Mock Interview Practice Sessions
- Rank Order List (ROL) and SOAP/Match Q&A

The following resources are provided by third-party organizations and are free to medical students:

AMA FREIDA
AMA FREIDA is an interactive database that provides access to fellowship and residency information:

ACGME
ACGME also provides residency information from a graduate medical education perspective: https://freida.ama-assn.org/

AAMC Careers in Medicine
The AAMC Careers in the Medicine (CiM) can help students choose specialties that best fit their attributes, provide details about more than 120 specialty choices, and compare qualifications and programs. All US MD students receive free access to CiM and can sign up by using their AAMC account that was created when signing up for the MCAT, AMCAS, etc. Get started now: https://www.aamc.org/cim/.
AAMC Residency Explorer Tool
The AAMC residency explorer tool allows students to enter their key applications data and compare their application profile to previously matched applicants.
https://www.residencyexplorer.org/Account/Login?ReturnUrl=%2F

Texas STAR Data
Medical students can search a database to compare their application profile to previously matched medical students across various medical specialties and residency programs. The Office of Student Affairs will grant students access to the Texas STAR data around the same time that ERAS tokens are issued, usually in December of the third year of medical school.
**MD Student Responsibilities**

**Employment:** The time available for gainful employment during medical school is limited. If additional funds are necessary, the student should discuss the problem with a Financial Aid Officer. A student who decides to accept a job should notify the Office of Academic Affairs so that academic progress may be monitored.

**Equipment Purchases:** Medical students at Wake Forest School of Medicine are required to purchase a number of items for use in classes such as Clinical Anatomy and Physiology and for clinical situations. Details are provided to students during Orientation.

**Health Insurance:** Wake Forest School of Medicine requires that all students have adequate and applicable medical insurance. Any charges generated that are not covered by the student’s insurance policy will be the personal responsibility of the student. Students who are eligible to continue coverage under a parent’s or spouse’s policy may do so. As an alternative, Wake Forest School of Medicine offers a student plan through United Healthcare Student Resources. The cost of this insurance is billed to the student each semester on the student account. Students are automatically enrolled in the plan each semester and are required to waive out of the plan each semester if coverage is not needed. Students who fail to waive during the designated waiver period will be automatically enrolled in the plan and responsible for all premium costs.

**Dental & Vision Insurance:** Optional dental and vision insurance is offered to all medical students through United Healthcare. Students must enroll in the dental and vision plans each year directly with United Healthcare. Open enrollment occurs once each year during the month of August.

**Identification:** The Wake Forest Baptist Health badge is issued at Orientation and should be worn above the waist by the student at all times while in the Medical Center or while in other affiliated hospitals, offices, and clinics. Once activated, it is used for identification purposes and for activities at Wake Forest and will give access to the Wake Forest School of Medicine library services. Students who lose their badges will have to purchase replacements and may do so by contacting the Badge Office at (336) 716-0069 for assistance.

**Laboratory Coats:** Students are provided with disposable laboratory coats as needed, according to OSHA guidelines.

**White Coats:** Students are provided with white coats to wear on the wards and during patient interactions. White coats are presented to students during the White Coat Ceremony. Additional white coats may be ordered at the students’ cost from the Wake Forest University Taylor Bookstore by contacting (336) 758-3388 or by emailing wfu@bkstr.com.

**Mail:** Each student is provided a Medical Center e-mail address. Students are responsible for managing their e-mail account to accommodate official correspondence. Physical mailboxes and combination locks for medical students are assigned upon matriculation and located on the third floor of the Bowman Gray Center for Medical Education.

**Students are responsible for any correspondence sent to the student mailbox.** The student should use his or her year of graduation as part of his or her Medical Center address. Students are responsible for checking their box often to collect official communications. The address for the Medical Center is Medical Center Boulevard, Winston-Salem, NC 27157.

**Pager Services:** Pager service is essential for all Year 3 and 4 students. Prior to Year 3 orientation, the Office of Student Affairs and the Wireless Communications Office will provide information regarding the Medical Center pager service. Service is offered through two sources: the SPOK Mobile app or a physical pager. The SPOK Mobile App is used on smartphones, and demos of the app and downloading assistance is provided by the Wireless Communications office. The Wireless Communications office is located on the first floor of the Gray Building near the Hawthorne Road parking deck tunnel entrance. All associated fees for the pager service will be funded by the Office of Academic Affairs.

**Laptop:** Students are required to provide their own device that meets the minimum requirements set forth by Academic Computing.
MD Program Awards and Honors

Each year students who have demonstrated excellence in the field of medicine are selected to receive awards. These are given by the clinical departments, faculty, and student body. A plaque or certificate and a monetary gift may accompany the award. The following are the awards and honors bestowed annually:

Alpha Omega Alpha Honor Medical Society: A professional medical organization that recognizes and advocates for excellence in scholarship and the highest ideals in the profession of medicine. The top 25 percent of a medical school class is eligible for nomination to the society, and up to 16 percent may be elected based on leadership, character, community service, and professionalism.

American Academy of Neurology Medical Student Prize for Excellence: To recognize a graduating medical student for excellence in clinical Neurology.

Charles Brian Clark Memorial Award: The Charles Brian Clark Memorial Award is presented to a faculty or staff member who is recognized for outstanding service to the senior class.

Charles B. and Agnes Cree Deane Cancer Research Award: For outstanding work in clinical Oncology.

Charles M. Howell Memorial Excellence in Dermatology Award: For the graduating medical student who, during his or her interaction with the faculty of the Department of Dermatology, best exemplifies leadership, intellectual ability, achievement, and humanity.

Cultural Awareness Award: For outstanding service in cultural awareness.

David Bryan Sloan III, M.D. Award for Excellence in Ophthalmology: For the graduate showing the most interest and aptitude in Ophthalmology.

Dr. Martin and Sandra Castelbaum Award for Excellence in Internal Medicine: For the senior student with the best overall performance in Internal Medicine. Dr. Martin Castelbaum graduated from Wake Forest Medical School in 1958, and his career in Internal Medicine epitomized a dedication to the welfare of his patients. The Department of Internal Medicine at Wake Forest School of Medicine has recognized an outstanding member of the graduating class who best embodies the principles and ideals of the specialty of Internal Medicine. These ideals include the overriding principle, “to be undivided in the fight against illness and premature death and to be trustworthy in our knowledge for every patient that comes to see us.”

Gold Humanism Honor Society: Recognizes medical students who are exemplars of humanistic patient care and who can serve as role models, mentors, and leaders in medicine. The institution may elect 10 to 15 percent of the graduating class.

The Helms Award in Internal Medicine: For the senior student who best embodies the tenets of the ideal physician—the person we would want to be on call with, have care for our families, and see on our healthcare team on July 1st. Jeff Helms graduated from Wake Forest Medical School in 1962. He has practiced Internal Medicine in Winston-Salem for 44 years and embodies those traits we look for in our colleagues and ourselves.

Isadore and Rachell Meschan Award for Academic Excellence in Radiologic Sciences: To the student who has performed outstanding research and demonstrated academic excellence in Radiology.
The Leonard Tow Humanism in Medicine Award Presented by the Arnold P. Gold Foundation: To the student and faculty member who best demonstrate the foundation’s ideals of outstanding compassion in the delivery of care; respect for patients, their families, and healthcare colleagues; and clinical excellence.

M. Robert Cooper Scholarship Awards: For expressing serious interest in the field of Oncology.

Medical Alumni Association Excellence Award: For the senior who embodies the concept of the total physician.

Medical Student Award for Excellence in Anesthesiology: For the most outstanding student in Anesthesiology.

Michael R. Lawless Pediatric Merit Award: For all-around ability and interest in Pediatrics.

Norman D. and Dot G. Potter Award in Geriatrics: For excellence in the field of Geriatrics.

Obstetrics and Gynecology Merit Award: For outstanding academic and professional stature in OB/GYN.

Outstanding Medical Student in Psychiatry Award: For the most outstanding student in Psychiatry.

R. W. Prichard History of Medicine Award: Given in memory of Robert W. Prichard, M.D., a distinguished member of the faculty for 44 years and longtime chair of the Department of Pathology and Director of Laboratories for North Carolina Baptist Hospital. Dr. Prichard was also widely respected as a medical historian. The award is given to a medical student who is judged to have written an outstanding paper on the history of medicine.

Richard T. Myers Surgical Merit Award: For excellence in the field of Surgery.

Robert P. Vidinghoff Memorial Award: For aptitude and devotion to the field of Family Practice.

SAEM Medical Student Excellence in Emergency Medicine Award: Presented annually to each medical school in the United States. Awarded to the medical student who best exemplifies the qualities of an excellent Emergency Physician.

Strickland Award in Primary Care: For the senior student who demonstrates the highest potential for and commitment to the practice of primary care in Internal Medicine. The award is given by the Robert Strickland family to honor Dr. William Y. Rice, III. Dr. Rice has practiced General Internal Medicine at our institution since 1992 and epitomizes the definition of the consummate primary care physician. He strives to practice and model caring for his patients in a manner that we would want for ourselves and for our families. Outstanding performance in the field of Primary Care.

Tinsley R. Harrison Award in Internal Medicine: For the senior student with the highest rank in medical knowledge in Internal Medicine. This award is named for the first Chair of Internal Medicine at this institution and a founding member of the original medical school. His famous text, Principles of Internal Medicine, which was conceived when Harrison was Chair here, is now in its 19th edition and still bears his name.

Wake Forest School of Medicine Excellence in Neurology Award: For the most outstanding student in Neurology.
Graduate School of Arts and Sciences – Biomedical Sciences Program

Procedures, processes and practices for these programs may be found in the 2021-2022 Graduate School of Arts and Sciences Bulletin and on the web: https://school.wakehealth.edu/Education-and-Training/Graduate-Programs/About-Biomedical-Graduate-Programs-Office

The Wake Forest University Graduate School of Arts and Sciences offers biomedical graduate degree programs in the following areas on the School of Medicine campus:

- Addiction Research and Clinical Health (MS)
- Biochemistry and Molecular Biology (PhD)
- Biomedical Engineering (MS/PhD)
- Biomedical Informatics (MS)
- Biomedical Science (MS)
- Cancer Biology (PhD)
- Clinical Research Management (MS)
- Comparative Medicine (MS)
- Genetic Counseling (MS)
- Health Disparities in Neuroscience-related Disorders (MS)
- Healthcare Leadership (MHL)
- Integrative Physiology and Pharmacology (PhD)
- Microbiology and Immunology (PhD)
- Molecular Genetics and Genomics (PhD)
- Molecular Medicine and Translational Science (MS/PhD)
- Neuroscience (MS/PhD)
- Translational and Health System Science (MS)

The Graduate School also offers joint degree programs with the MD program for all listed PhD degree programs, the PA program with the Molecular Medicine and Translational Science PhD program, and the undergraduate campus on BS/MS or BA/MS in Neuroscience.

Mentors for graduate students enrolled in the biomedical graduate programs are predominantly drawn from the School of Medicine and are focused on six key focus areas that the Medical Center has identified as core to our research expertise, with a desire to synergize across these areas as appropriate. The six areas of focus are:

1. Cancer
   a) Lung cancer
   b) Precision oncology
   c) Tobacco control

2. Neurosciences/Brain
   a) Substance abuse and addiction
   b) Pain

3. Regenerative Medicine
   a) Micro-nan fabrication
   b) Body on a chip
   c) In situ regeneration
   d) Manufacturing innovation

4. Aging/Alzheimer’s Disease
   a) Healthy aging
   b) Effect of brain again on peripheral metabolism and physical function
   c) Role of energy metabolism in the pathogenesis of Alzheimer’s disease and dementia

5. Diabetes/Obesity /Metabolism
a) Translational programs in the precision medicine of diabetes and obesity
b) Brain and metabolism
c) Diabetes and heart disease

6. Cardiovascular disease
   a) Cardiovascular disease prevention
   b) Prediction and prevention of heart failure

Supporting these scientific focus areas are three primary activities and services that function to maximize the impact of our research, and particularly in our efforts to become a continuously learning health care system. These activities and services include Implementation Science; Clinical Informatics; and Population Health. As a learning healthcare system, we have the unique opportunity of translating the knowledge that we gain in our research environment into our business of improving health. Graduate students in biomedical sciences graduate programs have the opportunity to have an impact in these areas in support of improving human health.
**Graduate Student Rights and Responsibilities**

**Introduction**
Wake Forest University exists for the transmission of knowledge, the pursuit of truth, the development of students, and the well-being of society. Free inquiry and free expression are indispensable to the attainment of these goals. The Graduate School of Arts and Sciences is committed to providing an environment which will encourage graduate students to develop the capacity for critical judgment and to engage in a sustained and independent search for truth. The Graduate School is also dedicated to the principles of honor, mutual respect, and trust among the faculty and students. The common observance of professional ethics is basic to the study and research in which we are engaged.

1. **Rights**
   The minimal standards of academic freedom of graduate students outlined below are essential to any community of scholars. Any violations of these standards may be grounds for a student to initiate the grievance process.

   a. **Freedom of Access to Higher Education**
      The facilities and services of the University should be open to all of its enrolled students, and the University should use its influence to secure equal access for all graduate students to public facilities in the local community.

   b. **The Classroom and Research Environment**
      Graduate student performance will be evaluated solely on an academic basis, not on opinions or conduct in matters unrelated to academic standards.

      a. **Protection of Freedom of Expression**
         Graduate students are free to take reasoned exception to the data or views offered in any course of study or research activity and to reserve judgment about matters of opinion, but they are responsible for learning the content of any course of study for which they are enrolled.

      b. **Protection Against Improper Academic Evaluation**
         Graduate students have protection through orderly procedures (described in the section on Grievance Procedures) against prejudiced or capricious academic evaluation. At the same time, they are responsible for maintaining standards of academic performance established for the program in which they are enrolled.

      c. **Protection Against Improper Disclosure**
         Information about graduate student views, beliefs, and political associations which professors acquire in the course of their work as instructors, advisors, and counselors is considered confidential. Protection against improper disclosure is a serious professional obligation. Judgments of ability and character may be provided under appropriate circumstances, always with the knowledge or consent of the graduate student.

   d. **Protection Against Harassment**
      Graduate students have protection through orderly procedures (described in the section on Grievance Procedures) against physical (sexual, etc.) harassment and/or psychological abuse.

2. **Student Records**
   To minimize the risk of improper disclosure, access to academic and disciplinary records should be considered separately. Transcripts of academic records will contain only information about academic status. Information from disciplinary or counseling files will not be available to unauthorized persons on campus, or to any person off campus without the written consent of the graduate student involved, except where a judicial order of subpoena compels disclosure or health safety emergency cases are involved. No records will be kept which reflect the political activities or beliefs of graduate students. The Dean of the Graduate School should make provision for periodic review and possible destruction of non-current disciplinary records. Administrative staff and faculty members should respect confidential information about graduate students which they acquire while working with them.

3. **Student Affairs**
   a. **Freedom of Association**
      Graduate students bring to the campus a variety of interests previously acquired and develop many new interests as members of the academic community. They are free to organize and join associations to promote their common interests.

   b. **Freedom of Inquiry and Expression**
Graduate students and their organizations are free to examine and discuss all questions of interest to them, and to express opinions publicly and privately. They are free to support causes by orderly means which do not disrupt the regular and essential operation of the University.

Graduate students and their organizations will be allowed reasonable access to University facilities for academic purposes, organizational meetings, sponsored lectures, etc. Those routine procedures required by the University for obtaining access to facilities are designed only to insure that there is orderly scheduling of facilities as well as adequate preparation for the event, and that the occasion is conducted in a manner appropriate to an academic community. Graduate students and their organizations are allowed to invite and to hear any person of their own choosing. The University's control of campus facilities cannot be used as a device of censorship.

c. Student Participation in University Government
As constituents of the academic community, graduate students are free, individually and collectively, to express their views on issues of University policy and on matters of general interest to the graduate student body.

5. Off-Campus Freedom of Students
If activities of graduate students upon occasion result in violation of law, University officials should be prepared to apprise students of sources of legal counsel and may offer other assistance. Graduate students who violate the law may incur penalties prescribed by civil authorities. Only where the University's interests as an academic community are clearly involved should the special authority of the University be asserted to consider off-campus violations. The graduate student who incidentally violates University regulations in the course of his/her off-campus activity is subject to no greater penalty than would normally be imposed for such infractions.

b. Responsibilities
The faculty expects students to be mature and responsible members of the community, offers guidance in their freedom to learn, and subscribes to the statement of their rights. Those rights are linked to the student's commitment to academic integrity and responsible behavior as a member of the University community.

Infractions of academic integrity include plagiarism, cheating on examinations, misrepresentation of the work of other scholars, and the falsification or fabrication of data in reporting one's own research. These infractions, as well as acts that disrupt the educational environment and any violations of local or federal law which occur on the university campus or during University sponsored activities, can be grounds for disciplinary action which may include dismissal from graduate school.
**Statement of Philosophy of the Mentoring Relationship between Graduate Students and Advisors**

Masters and doctoral graduate student training are comprised of both classroom instruction and an apprenticeship relationship with one or more faculty members. Each individual who pursues a graduate degree has ultimate responsibility for his/her education and professional development. Likewise, a faculty member who advises a student has a responsibility to foster the successful development of the student into a member of the profession. Additionally, Wake Forest University Graduate School of Arts and Sciences has responsibilities to both the student and the faculty advisor to maintain and promote an environment that supports quality training programs.

This document serves as a Statement of Philosophy about the mentoring relationship between graduate students and their faculty advisors, as well as the institutional responsibilities to facilitate that relationship. The purpose of this document is to function as a statement of guiding principles that can promote the student’s successful completion of training, and guide their mentors’ efforts. It does not supersede institutional rules and regulations.

**Core Tenets of Graduate Training**

*Institutional Commitment*

Institutions that train graduate students must be committed to establishing and maintaining high-quality training programs that ascribe to scientific, humanistic and ethical professional standards. WFU will work to ensure that students who complete its programs are well-trained and possess the foundational skills and values that will allow them to mature into independent professionals with integrity. WFU’s commitment in this regard includes provision of oversight for length of training, maintenance of scholarly integrity, appropriate financial support, established procedures for addressing grievances, and various professional development-related opportunities. These opportunities can include effective and regular career guidance activities, reasonable access to institutional services, and other matters relevant to the education and professional development of graduate students. Additionally, WFU will strive to recognize and reward its graduate training faculty in support of their education of graduate students.

*Program Commitment*

The WFU Graduate School endeavors to establish and maintain robust training programs that provide students with the knowledge and career skills needed to function and succeed as independent professionals in their chosen fields. This commitment implies the maintenance of relevant course offerings and appropriate research opportunities. Each program of study in the Graduate School should have clearly defined procedures for assessment of students and closely monitor the progress of students during their courses of study.

*Commitment to Outstanding Faculty Mentoring*

Effective mentoring is crucial for graduate school trainees as they prepare for their careers. Faculty mentors should understand that such mentoring requires a commitment of substantial time and energy in order to ensure each student’s professional and personal development. Furthermore, the mentor must recognize that the success of the relationship hinges on mutual trust and respect. Effective mentoring should include teaching the method of inquiry for the specialty, providing regular constructive feedback and constructive criticism to foster professional maturation, teaching the conventions of the field of study, and promoting students’ careers by providing appropriate opportunities for independent work and recognition. Effective mentors should strive to facilitate the student’s completion of his or her thesis/dissertation, to help guide the student through the requirements for completion of the degree, and to advise the student to be knowledgeable of and act in accord with all university policies and procedures.

Graduate student mentors should encourage students who seek to take a novel approach to achieving personal success. Good mentors should possess and exemplify high ethical standards, competent communication skills, recognize the contributions of students in all endeavors including publications and development of patentable devices or methods, and have a strong commitment to original research and scholarship. Good mentors should work to provide their students with an environment that is intellectually stimulating, emotionally supportive, safe and free of harassment. Lastly, where appropriate, the mentor should maintain or identify financial support that is appropriate for the program of study, and that will allow the student to complete the requirements for the degree.
Commitments of Graduate Students

Effective mentoring is a dynamic relationship between the faculty advisor and the graduate student. As such, in addition to the desired commitments of faculty members, students share an equal responsibility for their educational success as they prepare for their careers. First and foremost, students have the primary responsibility for the successful completion of their degree. Towards that end, students need to dedicate themselves to their scholarship and research, as advised by the faculty mentor. This includes pursuing opportunities to develop the necessary skills to succeed in the desired field of study and chosen profession, and when appropriate, taking advantage of the various resources that are made available for personal and professional development. The student must also recognize that the success of the mentoring relationship with their faculty advisor hinges on mutual trust and respect. Similar to their faculty advisor, students should possess and exemplify high ethical standards, strive to manifest competent communication skills, recognize contributions of fellow students, and have a strong commitment to original research and scholarship. Students should also work to provide themselves, fellow students, staff, and faculty with an environment that is intellectually stimulating, emotionally supportive, safe and free of harassment. The student is to be knowledgeable of and act in accord with all university policies and procedures. Lastly, where appropriate, the student should work with his or her mentor to identify financial support that is appropriate for the program of study, and that will allow the student to complete the requirements for the degree.
Honor Code

PART 1: THE HONOR CODE

ARTICLE I. Preamble and Purpose

The purpose of this Graduate Honor Code (hereinafter “the Code” or “the Honor Code”) is to provide guidance for student conduct with respect to academic pursuits.

The Code applies to all students enrolled in the Wake Forest University Graduate School of Arts and Sciences or the Divinity School of Wake Forest University. All forms of academic work performed by any graduate student enrolled on a part-time or full-time basis shall be subject to the stipulations of the Honor Code. Such work includes, but is not limited to, course work, lab work, thesis or dissertation work, research, and teaching. Upon acceptance for admission to the Graduate School of Arts and Sciences or the Divinity School, entering students will be informed of the Code. It is the responsibility of new students to be adequately informed of the Code, including all key provisions, such as, but not limited to, the affirmative duty to report offenses, the scope and limits of the Honor Code, and the names of the current officers. New students shall be required to sign a statement indicating that they were present for the informational session and that they agree to comply with the Honor Code. Changes in the Honor Code will be published and distributed to students upon adoption. Students are charged with notice of, and are bound by, this Code.

Copies of the Code are available from the offices of the Dean of the Graduate School of Arts and Sciences and the Dean of the Divinity School. For students in the Graduate School, final decisions on sanctions due to violations of the Code rest with the Dean of the Graduate School. For students in the Divinity School, final decisions on sanctions due to violations of the Code rest with the Dean of the Divinity School.

The Code applies only to alleged misconduct identified in Article III or Article IV which occurs in academic pursuits or within the University community. Policies pertaining to other misconduct within the University community continue to apply, and the faculty and the administrations of the appropriate graduate program are responsible for enforcement of such other policies (See Article IX for a definition of “appropriate”).

ARTICLE II. The Code

We conduct our academic endeavors with honor, integrity and professionalism. We do our own work, credit the work of others, and provide the full truth about our work.

ARTICLE III. Scope and Jurisdiction

Section 1. Honor Council Original Jurisdiction

The Graduate School Honor Council (hereinafter “the Honor Council”) shall have authority to hear and to determine charges of lying, cheating, stealing, vandalism, deception, research misconduct, or failure to report an Honor Code violation by any Graduate School or Divinity School student in his or her academic pursuits or within the University community. These terms should be construed to have their ordinary, non-legal meaning.

Plagiarism and Deception

“PLAGIARISM” is a type of cheating. It includes: (a) the use, by paraphrase or direct quotation, of the published or unpublished work of another person without complete acknowledgment of the source; (b) the unacknowledged use of materials prepared by another agency or person providing term papers or other academic materials; (c) the non-attributed use of any portion of a computer algorithm or data file; or (d) the use, by paraphrase or direct quotation, of online material without complete acknowledgment of the source.

Please refer to the Harvard University online tutorial on avoiding plagiarism: https://www.extension.harvard.edu/resources-policies/resources/avoiding-plagiarism

"DECEPTION" includes any false or deceiving representation. In the academic context, such representations include: (a) any attempt to avoid meeting the stated course requirements, such as making false statements to
avoid taking examinations at the scheduled times or to avoid turning in assignments at the scheduled times; (b) listing sources in a bibliography not directly used in the academic exercise; or (c) submitting falsified, invented, or fictitious data or evidence, or concealing or distorting the true nature, origin, or function of data or evidence.

Section 2. Faculty Retention of Jurisdiction
All disputes will be handled by the Honor Council except in instances where the cases cannot be addressed by the Honor Council in a timely manner, such as between academic terms. In this situation the Graduate School or Divinity School administration and the relevant program faculty will have jurisdiction over the handling of the misconduct case.

ARTICLE IV. Duty to Report an Honor Code Violation
A student, faculty member or staff member that reports an Honor Code violation is referred to as the Reporter. The individual accused of an Honor Code violation is referred to as the Respondent.

Any faculty or staff member may report an Honor Code violation or suspected violation to the Chairperson or Secretary of the Honor Council or, in the event such persons cannot be reached, to the Dean of the Graduate School or Divinity School as appropriate. The Chairperson or Secretary should inform the relevant Dean that a violation has been reported, although no action on the part of the Dean is needed at this time.

Students who have knowledge of, have witnessed or reasonably believe that they have witnessed or have knowledge of an Honor Code violation should report the violation or suspected violation to the Chairperson or the Secretary of the Honor Council within a reasonable time, not to exceed five academic days (as defined in Article IX). This report should include the name of the Reporter and the Respondent, the date on which the report is submitted, the date of the violation of the Code, the charge and the description of the purported violations, and the names of other witnesses. If the Chairperson or Secretary cannot be reached to make a report, then the student should report to the appropriate Dean. The report may also be filed at a later date if the appropriate Dean determines that special circumstances existed that prevented the report from being filed within the five-day time period.

The failure of any student to comply with this affirmative duty to report (except in the circumstances referred to above) shall be a violation of the Code. Refusal to testify before the Honor Council, or failure to do so without good cause, is also a violation of the Code; however, no person shall be compelled to be a witness against himself or herself, or to testify against his or herspouse.

PART 2: THE HEARING, SANCTIONS AND APPEALS PROCEDURES

ARTICLE V. Pre-Hearing Procedures
When a report of an Honor Code violation or suspected violation is received, the Chairperson of the Honor Council shall convene, in a timely manner, a Pre-hearing Sub-committee composed of the Chairperson, the Secretary, one (1) faculty member from the Honor Council and two (2) students from the Honor Council.

Members of the Pre-hearing Sub-committee may not be from the same department as the Reporter or Respondent; if the Chairperson or the Secretary is from the Reporter or Respondent’s department, a member of the Honor Council will be asked to serve in that person’s role for the pre-hearing and hearing procedures for the particular case. The Sub-committee will consider the report and make a decision as to whether the accusation falls under the prohibited conduct described in Article III, Section 1. If it does not, this decision will be conveyed promptly in writing by the Secretary to the Reporter, the appropriate Dean and the Chairperson. No further action will be taken. The Chairperson will destroy the report and any accompanying records.

If the Pre-hearing Sub-committee determines that the accusation does include an act or acts that may constitute a violation of the Honor Code, then a written report of the violation(s) as charged shall be prepared by the Secretary and provided to the Respondent promptly with copies to the Reporter, the appropriate Dean, the members of the Pre-hearing Sub-committee, the Respondent’s Academic Advisor, and the Respondent’s Program Director. This written report shall include the date, time and place of a hearing that will take place within four weeks from the date of notification. The report should contain a full description of the Respondent’s hearing rights.
ARTICLE VI. Hearing

Procedures Section 1. Name and Purpose

The Hearing will be an administrative, not a legal, proceeding. Its purpose is to arrive at the truth.

Section 2. Hearing Procedures

The Panel for the Hearing will consist of the Chairperson, the Secretary and four (4) additional faculty members and four (4) student members of the Honor Council with the numbers of student and faculty members from the two campuses being as similar as possible. The Chairperson shall appoint one of the faculty members as Solicitor who will coordinate the exchange of information between the Reporter, the Respondent and the student and faculty members of the Honor Council before and at the Hearing. The Hearing shall be conducted by the Chairperson (who will not vote). The Secretary of the Honor Council shall not vote except in the case of a tie. The Solicitor does not vote.

Section 3. Time and Place of Hearing

The Honor Council shall conduct its Hearing within four weeks after the Chairperson’s receipt of the Pre- Hearing Sub-committee’s conclusion that such a Hearing is warranted. The time and/or place of the Honor Council Hearing may be changed by a majority vote of the members of the Panel. The Solicitor and the Respondent shall meet no less than a week prior to the Hearing to exchange witness lists and clarify the kinds of evidence to be presented. If a witness(es) is (are) to be involved at the Hearing, this should be mentioned at this meeting; a “witness” is someone who viewed or otherwise acquired information relevant to the alleged Honor Code violation. At that time the Respondent will also notify the Solicitor if he or she will have a representative (as defined in Article VII) for the Hearing. The Honor Council Hearing shall be closed to the public.

The Chairperson and the Secretary shall make the selection of the Panel no later than a week before the beginning of the Hearing. Panel members shall not be from the same department as the Respondent or the Reporter. The members of the Panel will be supplied with the report against the Respondent when they are notified of their selection for the Panel. Should the Chairperson or the Secretary be unable to attend a Hearing or if the Chairperson and/or Secretary are from the same department as the Reporter or Respondent, the Panel shall select an appropriate member of the Honor Council to serve in the Chairperson’s or Secretary’s role for the duration of the Hearing.

Should any member of the Panel conclude, upon reviewing the report and learning the identity of the Respondent, that he or she cannot render an impartial decision, then he or she shall notify the Chairperson and withdraw. In the event of a withdrawal, a new Panel member will be chosen by the Chairperson.

The Secretary of the Honor Council will make a summary record of the Hearing. An audio recording, video recording, or comparable recording will be made of the Hearing. This recording will be available to the Panel during their deliberations, to the Secretary in preparing the summary report, to the appropriate Dean for review of the Sanction or during the appeals process, and to the Respondent if he or she requests an appeal. The recording will become a part of the file to be kept by the appropriate Dean.

Section 4. Chairperson’s Duties

1. The Chairperson of the Honor Council shall preside at all Honor Council meetings and Hearings.
2. The Chairperson may require any person disrupting the orderly proceedings of a Hearing to leave.
3. The Chairperson shall have the right to declare a recess at any point in the Hearing.
4. The Chairperson shall inform the Panel, the Reporter and all others present at the Hearing that they shall not divulge any information about the accusation or the Hearing.
5. The Chairperson shall appoint a faculty member serving on the Honor Council to serve as the Solicitor for each Hearing.

The Chairperson shall limit evidence as described in Section 7 of the Policy.

Section 5. Secretary’s Duties

1. The Secretary of the Honor Council will notify in writing the Chairperson, the Dean of the Graduate School or Dean of the Divinity School and the Reporter of the Pre-hearing Sub-committee’s decision about whether an alleged offense or offenses falls within the Honor Code’s prohibited conduct.
2. The Secretary will provide to the Respondent a written report of the alleged offenses(s); the time, date and place of the Hearing; and the rights of the Respondent within 48 hours after the Pre-hearing Sub-committee finds that an allegation or allegations does fall within the Honor Code’s prohibited conduct. Copies of this written report will also be given to the Chairperson, the Reporter, and the appropriate Dean, the members of the Pre-hearing Sub-committee, the Respondent’s Academic Advisor, and the Respondent’s Program Director.

3. The Secretary will make a summary record of the Hearing.

4. The Secretary will cast the deciding vote in the case of a tie vote in the Panel Hearing and in the Sanctions Hearing.

Section 6. Solicitor’sDuties
1. The Solicitor will coordinate the exchange of information between the Reporter, the Respondent and the members of the Hearing Panel.

2. The Solicitor will begin questioning the Reporter, the Respondent and any witnesses as appropriate.

Section 7. Conduct of the Hearing
The Chairperson shall call the Hearing to order by reminding the Respondent and all witnesses that they are honor bound to tell the truth before the Council. Any witness who is not bound by the Honor Code will be sworn in or affirm before he or she testifies. The Honor Council will create and maintain an appropriate oath and affirmation.

The Hearing shall be limited in scope to a determination of whether an honor code violation has taken place. All sources of evidence that may reasonably be supplied and are likely to be helpful in establishing the veracity of the claim should be brought to such a hearing, with materials being distributed by the secretary beforehand to the solicitor, the Reporter, the Respondent, and the student and faculty members of the Honor Council. The Chairperson shall have the authority to limit evidence (in any form) that, in the opinion of the Chairperson, has minimal relevance to the issues in the matter or is redundant.

The Secretary shall read the written report to the Panel. If the Respondent admits to the charge(s) and stipulates to the facts as written in the report, then the Panel will only consider the question of sanctions, in a Sanctions Hearing.

If the Respondent does not admit to the charges, presentation of evidence and questioning will begin. The Reporter and any other witnesses shall be questioned by the Solicitor regarding the charge(s). At the conclusion of the questioning of each witness called by the Solicitor, the Secretary and each member of the Panel shall be given the opportunity to ask questions. Then, the Respondent or a representative chosen by the Respondent may ask additional questions. Questioning shall proceed until all parties are satisfied that, or in the opinion of the Chairperson, the witnesses can furnish no further relevant information.

Section 8. The Respondent’sRebuttal
At the conclusion of the evidence of support of the charges, the Respondent or the Respondent’s representative may present evidence, including witness testimony, rebutting the charges of an Honor Code violation. At the conclusion of the testimony of each witness called by the Respondent, the Solicitor, the Secretary and each member of the Panel shall be given the opportunity to ask questions. Questioning shall proceed until all parties are satisfied that, or in the opinion of the Chairperson, the witnesses can furnish no further relevant information.

Section 9. SummaryStatements
A summary statement may be given by the Respondent or the Respondent’s representative. A summary statement may be given by the Solicitor.

Section 10. PanelDuties
The Chairperson shall instruct the Panel as to the charge and the factors to be considered during the deliberation on the charge(s). Upon the conclusion of such instructions the Chairperson shall adjourn this phase of the Hearing. The Panel shall promptly conduct its deliberations in private and reach a decision on the charge(s).

A decision that a violation of the Code has occurred shall require a simple majority vote by the Panel that the charge(s) have been proven by a preponderance of the evidence. An abstaining vote is not a vote confirming the violation. In the case of a tie the Secretary shall vote. If there are not at least four (4) votes finding a violation of the Honor Code, then the charge(s) have not been proven. In determining whether there was a violation of the Code, the Panel should only consider evidence and testimony that was presented at the Hearing.
Upon reaching their decision, the Panel shall inform the Chairperson in writing. The decision shall then be reported by the Chairperson to the Reporter and the Respondent. The Chairperson will then dismiss the Panel by reminding each member that he or she is forbidden to divulge any information about the Hearing.

Section 11. The Sanction Hearing
If the Panel finds that there was a violation of the Code, the Chairperson shall reconvene the Panel fora Sanction Hearing, providing the Respondent with the opportunity to be present. This hearing may be held directly following the Hearing but must take place within five days, and should be held in private. First, the Solicitor may present facts, evidence, and arguments as to the sanction(s) being sought. Second, the Respondent or the Respondent’s representative may present mitigating facts, evidence and arguments. At the conclusion of the arguments the Chairperson shall adjourn the Panel to deliberate regarding the sanctions to be recommended. The Panel shall promptly conduct its deliberations in private and shall reach a decision.

Decisions regarding a particular sanction shall require a simple majority vote in favor of the sanction. In the case of a tie, the Secretary shall vote. A Panel may not decide that no sanction be imposed. Once a decision as to a particular sanction is reached, the Panel shall announce its decision regarding the recommended sanction to the Chairperson. Before releasing the Panel, the Chairperson shall remind the members of the Panel that they are forbidden to divulge information about the hearing or the Panel’s decision.

Section 12. Notifications of Findings
The Panel’s findings and recommended sanction(s) shall be promptly conveyed to the Respondent by the Chairperson of the Honor Council. The findings and recommended sanction(s) shall be reported to the appropriate Dean in a timely manner. All copies of the record, findings and recommendations shall be transferred to the appropriate Dean for retention in accordance with applicable Graduate School or Divinity School policies, and for a final decision in accordance with Section 14 of this Code.

Section 13. Appeals Procedure
A student found in violation of the Honor Code may appeal the decision or the sanction recommendation of the Panel to the Secretary of the Graduate Council. Written notice of appeal from the Respondent or his/her representative shall be given to the Secretary of the Graduate Council within 10 academic days after the Sanction Hearing. The Graduate Council consists of 6 elected faculty members from the Reynolda campus, 6 elected faculty members from the Bowman Gray campus and two Graduate Student Representatives. The Dean and Associate Deans of the Graduate school are ex-officio members of the Graduate Council and will not take part in the appeals procedure. The Dean of the Divinity School is a member of the Graduate Council.

The Graduate Council will be provided with a copy of the written report of the charge, the summary records kept by the Honor Council Secretary during the hearing, and the written appeal of the Respondent. The Graduate Council will meet in a timely manner to consider the Honor Council’s decision and the appropriateness of the recommended sanction. The Graduate Council will decide whether to support the findings and recommended sanctions of the Honor Council or whether to recommend changes. A written notice of their decision will be given to the appropriate Dean by the Secretary of the Graduate Council in a timely manner.

Section 14. Final Disposition
The appropriate Dean shall consider the findings and recommended sanction(s) of the Hearing Panel and the recommendations of the Graduate Council in the case of a Respondent’s appeal, and any alleged exceptional circumstances, and shall make a decision to accept or alter either the findings and or the recommended sanction(s). The office of the appropriate Dean, or his or her designee, shall be responsible for processing and supervising the imposition of sanction(s). In the case of ongoing “external” investigation of the Honor Code violation, the Dean of the graduate School may delay the final decision until formal findings are provided. The decision of the Dean shall be final.

Section 15. Sanctions
In the event of a finding of an Honor Code violation, the Panel shall consider and recommend to the appropriate Dean that one or more of the following sanctions be imposed. This list is not exhaustive, and the Panel may recommend alternative sanctions not included in the following list if the Panel determines that alternative sanctions are appropriate. In the event of a question about the application or meaning of a sanction recommended by the Panel or imposed by a Dean, the appropriate Dean shall be consulted and the decision of the Dean shall be final.

The sanctions which may be imposed in the case of a Honor Code violation will ordinarily be selected from the
following (more than one of the sanctions may be imposed when deemed appropriate):

a. **Notice and Censure**: A written reprimand that continuation of conduct in violation of the Honor Code may be cause for more severe disciplinary sanctions. This may include a warning or more severe disciplinary sanction in the event of the determination of a subsequent violation within a stated period of time.

b. **Restitution**: Reimbursement for defacement, damage to, or misappropriation of property, whether that of the University, any member of the University community, any guest or visitor of the University or any third party.

c. **Suspension**: Exclusion from classes, removal from facilities and termination of any associated access rights (including but not limited to computers, computer networks, laboratories, identification cards, keys, libraries and parking), termination of faculty and staff mentoring and other privileges and activities (including but not limited to stipends and health insurance subsidies) with forfeitures of academic credits as set forth in the notice of suspension from the appropriate Dean. Sanctions for the Honor Code violation of cheating shall ordinarily include a recommended F or failing grade in the course involved and authorized withdrawals in the student’s other courses, regardless of the semester when the offense was committed. If a suspension is more than one semester, the suspension shall begin immediately and shall be served in consecutive semesters. Suspension does not extend the total allowable time for completion of the degree.

d. **Expulsion**: Termination of student status, with readmission subject to the approval of the program faculty and the appropriate Dean. No petition for readmission may be considered before the expiration of one calendar year from the date of expulsion. Sanctions for the Honor Code violation of cheating shall ordinarily include a recommended “F” or failing grade in the course involved and authorized withdrawals in the student’s other courses, regardless of the time in the semester that the offense was committed.

**ARTICLE VII. Rights of the Respondent**

The Respondent shall have the following rights:

1. A right to have the charges against him or her submitted in writing and to receive the written charges before the beginning of the hearing.

2. A right to a copy of procedures established by the Honor Code for the hearing of alleged Honor Code violations. This shall be given to him or her at the same time as the notice of the charge or charges.

3. A right to separate hearings where two or more students are reported to have participated jointly in a violation. If none of those accused of joint participation request separate hearings, they may have a joint hearing or separate hearings as the Pre-hearing Sub-committee determines.

4. A right to know the nature of the evidence and, when practical, to examine the evidence before the hearing.

5. A right to appoint a Representative to question witnesses, to give a summary statement at the Hearing and to be present at the Sanctions hearing. The Representative will be a faculty member, staff member or student from the Wake Forest University Graduate School. Legal counsel can attend the hearing and advise the Respondent, but may not participate in the hearing. Law students are not permitted to assist the Respondent or to participate in the Hearing.

6. A right to summon witnesses and to testify on his or her own behalf, but the number of character witnesses, if any, may be reasonably limited by the Chairman of the Honor Council.

7. A right to meet with the witnesses, and to question them during the Hearing, subject to limitation by the Chairperson of the Honor Council.

8. A right not to be compelled to testify against himself or herself.

9. The Respondent’s spouse cannot be compelled to testify against him or her.

10. A right to present evidence of extenuating circumstances, subject to limitation by the Chairperson of the Honor Council.

11. A right not to be tried for one offense, and convicted of another, e.g., lying before the Council, without the same opportunity to defend against the other charge.
12. Until the Hearing and Appeals processes are complete, the Respondent has the right to participate in any University function except the following: participating in graduation exercises, receiving a degree, or receiving academic credit for courses taken during the semester in which the violation is alleged to have occurred, or other activities specifically prohibited by the appropriate Dean.

ARTICLE VIII. Organization of Honor Council

Section 1. Membership and Election
The membership and election of the Honor Council shall be determined as follows:

a. The Honor Council shall be comprised of sixteen (16) faculty members, eight (8) each from the Bowman Gray and Reynolda campuses and one (1) student from each department or program.

b. Faculty members of the Honor Council will be appointed by the appropriate Dean. Appointments are effective September 15th of each calendar year. Members of the Graduate Council may not be appointed to the Honor Council.

c. Student members of the Honor Council are appointed by the chair or program director of each department or program, one (1) from each department or program. Appointments are effective September 15th of each calendar year. Graduate Student Association chairs and representatives may not be appointed to the Honor Council.

d. A student appointed to the Honor Council serves a one-year term. A faculty person appointed to the Honor Council serves a two-year term. Students and faculty may be appointed for up to three consecutive terms.

Section 2. Election of Officers
After appointment of new members, the Honor Council as a whole shall elect one (1) faculty member to serve as Chairperson, one (1) faculty person to serve as Secretary through September 14th of the following calendar year. The Chair and the Secretary should not be from the same department.

Section 3. Pre-hearing Sub-committee Selection
The Pre-hearing Sub-committee will consist of the Chairperson, the Secretary, one (1) faculty member of the Honor Council and two (2) student members of the Honor Council. The Chairman and Secretary will choose these three members, ensuring as equal a representation of the two campuses as possible and ensuring that the members to do not come from the same department or program as the Reporter or the Respondent. A faculty member of the Honor Council shall act as Solicitor.

Section 4. Hearing Panel Selection
The Panel will be comprised of the three (4) faculty members and four (4) student members of the Honor Council chosen by the Chairperson and the Secretary. The faculty members and students will be chosen to ensure as equal a representation between the two campuses as possible and to ensure that no member of the Panel is from the same department or program as the Reporter and the Respondent. To assure fairness to the Respondent and to equalize the burden of members of the Honor Council, ordinarily members chosen to serve on a Panel will be removed from the pool for the remainder of the calendar year, unless all council members have served, at which time all members will be returned to the list of potential jurors.

Section 5. Maintaining Readiness
Members of the Honor Council accept the duty of developing and maintaining their understanding of the Honor Code.

Article IX. Miscellaneous

“Appropriate Dean” refers to the Dean charged with the primary responsibility for overseeing the program in which the Respondent is enrolled.

An academic day is a day on which regularly scheduled classes are held, not including summer sessions.

Research misconduct is covered by two on-line documents for the Reynolda campus (http://www.wfu.edu/rsp/compliance.html) and for the Bowman Gray campus (http://www.wfubmc.edu/or/pp_man.html). While these policies are written for scientific research misconduct, for the purposes of this document, the policies apply to research misconduct in any field.
Graduate School Non-Academic Code of Conduct

Membership in the wider Wake Forest University campus community requires graduate students in the Graduate School of Arts and Sciences to be aware of the general student conduct expectations and campus standards found in the Wake Forest Student Code of Conduct available online at [http://deanofstudents.wfu.edu](http://deanofstudents.wfu.edu), and in hard copy at the Office of Dean of Students, 139 Benson University Center.

The Graduate School expects good citizenship and responsible behavior from students. When these expectations are not met, the non-academic misconduct process may be used to redirect students into more acceptable patterns of behavior. This process encourages students to take responsibility for their choices and actions, while also allowing the University to determine an appropriate disciplinary response.

Misconduct cases may result in a formal reprimand and the imposition of an educational condition, or a more severe level of sanction, including disciplinary probation, suspension or expulsion. Students need to be aware that certain types of behaviors may be deemed incompatible with membership in the School’s community, and that choices they make can compromise their education and future.

Set forth below are the types of prohibited conduct for which students are subject to disciplinary actions:

a. Actual or threatened physical injury to any person on University-owned or controlled property or at a University-sponsored or supervised function, or conduct that endangers the health or safety of any person.

b. Engaging in individual or group conduct that is violent, abusive, indecent, or unreasonably loud, or similar disorderly conduct that infringes upon the privacy, rights, or privileges of others by disturbing the peace or the orderly process of education on campus.

c. Unauthorized use, possession, or storage of any weapon or explosive (including fireworks) on University premises or at University-sponsored activities.

d. Forgery, counterfeiting, alteration, or misuse of any University record, document, or identification card.

e. Unauthorized entry into, or alteration of, any University computer records, or violation of computer use policies, including illegal use of University computer resources (or otherwise violating the ethical use of computing policy).

f. Sending threatening, obscene, or defamatory messages to another student or individual via e-mail, phone, voice-mail, or social media.

g. Knowingly filing a false report to any University authority: including police, human resources, student grievance, honor code, or non-academic honor code bodies.

h. Misrepresentation in seeking financial aid or University benefits.

i. Unlawful possession, use, distribution, or sale of any illegal narcotic or illegal dangerous drug as defined by the statutes of the State of North Carolina.

j. Theft of, or unwarranted damage to, University property or property of any member of the University community.

k. Failure to comply with housing regulations (Reynolda campus).

l. Failure to comply with the lawful directives of University employees or non-University contract employees acting within the scope of their duties; including those directives issued by a University administrator, police, or security officer to ensure the safety and well-being of students.

m. Entry into, or use of, any building, facility, room or other University property or grounds without authorized approval. This also includes the unauthorized possession or use of University keys, lock combinations, or other access codes.

n. Participation in illegal gambling activities on University-owned or controlled property or at a function identified with the University.

o. Possession or consumption of alcoholic beverages in contradiction of state law and/or University policy.

p. Entering or attempting to enter any event without proper credentials for admission (e.g., ticket, identification
The Graduate School of Arts and Sciences shall have the authority to hold students accountable under this Code of Conduct for certain off-campus behaviors (i.e., behavior that does not occur on University premises or in the context of a University, School, or student organization sponsored event or activity) that adversely affects a substantial University or School interest. In determining whether the conduct adversely affects a substantial University or School interest, the following shall be considered:

a. Whether the conduct constitutes or would constitute a serious criminal offense, regardless of the existence of any criminal proceedings.

b. Whether the conduct indicates that the student presented or may present a danger or threat to the health, safety, or wellbeing of any person.

c. Whether the conduct demonstrates a pattern of behavior that impairs the University’s, the School’s, or the Program’s ability to fulfill its mission or negatively impacts the learning environment.

d. Whether the conduct is disruptive to the ability of faculty to carry out the academic mission of the University.

The disciplinary sanctions that may be imposed for violations of this Code of Conduct may include any of the following actions:

a. A written reprimand.

b. Denial of specified University privileges.

c. Payment of restitution.

d. Educational or service sanctions, including community service.

e. Disciplinary probation.

f. Imposition of reasonable terms and conditions on continued student status.

g. Removal from a course in progress, or temporary or permanent removal from campus, including public areas.

h. Enrollment restrictions on a course or program.

i. Suspension.

j. Dismissal.

Students who are accused of performing or contributing to misconduct will be subject to a review process that will include a review of the allegation, a hearing before a committee of the student’s peers and faculty, and potential disciplinary action. These procedures will be undertaken by the Graduate School Honor Council, following the guidelines for the honor code (https://prod.wp.cdn.aws.wfu.edu/sites/275/2019/01/HonorCode.pdf). However, in deciding each case, the Honor Council will use the guidelines of this document to determine if there was a violation of the institution’s Code of Conduct as opposed to the Honor Code. The Honor Council will make a final and formal recommendation to the Dean. As outlined in the Honor Code guidelines, the student may appeal the decision to the Graduate Council within 10 days of the sanction hearing. The Graduate Council will review all pertinent information and make a recommendation to the Dean, who will consider the recommendations by the Honor Council and the Graduate Council, in the event of an appeal. The Dean will consider all recommendations, and may accept the sanction recommendation, but has the discretion to alter the recommendation. The decision of the Dean is final.
**Leave of Absence**

A *leave of absence* allows a student enrolled in the Wake Forest University Graduate School of Arts and Sciences to interrupt his or her studies for a compelling reason, for example, a medical condition or a personal or family matter requiring absence from campus. A leave of absence is defined as a temporary separation from the Graduate School. To be eligible for a leave of absence, students should be in good academic standing, fulfilling research, service and course obligations.

Students who intend to take a leave of absence must submit a Request for a Leave of Absence form to the appropriate Office of the Dean of the Graduate School of Arts and Sciences. A letter of support should be provided to the Dean, co-signed by the student’s graduate program director and advisor. This letter must indicate all unsatisfied degree requirements for the student. If available, other supporting letters should be included in the request for a Leave of Absence.

Until students are notified by the Office of the Dean that the leave has been approved, they remain registered and are expected to fulfill their responsibilities. A Leave of Absence will not be granted retroactively. The maximum time for a leave of absence is one year. The effective date of a Leave of Absence might take into account a reasonable time to arrange for the suspension or completion of ongoing experiments and projects, and proper withdrawal from courses.

Students on leave of absence should submit a request to return to the appropriate Dean at least one month prior to the first date of the semester or term in which a return is planned. This request may require a letter which addresses the suitability of the student’s return. Students who have decided not to return from a leave of absence should inform the appropriate Dean of the Graduate School of Arts and Sciences in writing. Students who fail to petition to return after a leave of absence will be withdrawn from The Graduate School of Arts and Sciences and need to apply for readmission in order to return.

Unless allowed by the funding agency or source supporting the student’s stipend, a student may not qualify for stipend support during a Leave of Absence. In all cases, the guidelines provided by the supporting agency will apply. Since these guidelines may vary from one agency to another, students are encouraged to consult agency program officials to determine the agency specific guidelines governing leaves of absence. If the student’s stipend is supported by internal funds, the Dean might be able to provide limited stipend support during a Leave of Absence.

If applicable, tuition is refunded on a prorated basis, and the refund schedule is set by the Wake Forest University Board of Trustees.

Approved leaves of absence automatically extend milestone deadlines by the length of the leave. This includes university and departmental requirements such as the qualifying exam deadline and prospectus deadline for PhD students, and the degree deadline. Leaves of absence do not exempt students from meeting the residency requirement or other Graduate School degree requirements.

Students on a leave of absence may not fulfill any degree requirements during the time on leave. If a student plans to be away from the University to work on a thesis, dissertation, or other degree requirements, this does not constitute a leave of absence and requires enrollment.

In order to facilitate communication between the student and the Graduate School, access to the campus network will be continued during the leave, but will be deactivated if the student does not return. Badge access will be deactivated during the period of leave.
Students who are granted a Leave of Absence must consult with their health insurance provider about the status of their policy while on leave. Students who have contracted for health insurance through the university should immediately contact the Student Health Insurance Coordinator. Health insurance is subject to federal and state laws and regulations.

International students who are granted a Leave of Absence must notify either the Office of Global Studies on the Reynolda Campus or the Office of International Studies on the Medical School Campus. Visa status is subject to federal laws and regulations.

Students on an approved leave of absence are not eligible for federal financial aid, including Federal Direct Loans. In some cases, student loans may not be deferred for the entirety of a leave. Students should contact Student Financial Services on the Reynolda Campus or the Office for Student Aid on the Medical School Campus for additional information.
Enrollment Definitions and Policies

Full-Time Status. A graduate student who devotes full-time effort to a graduate program as outlined by his or her faculty committee and is in full-time geographic residence with a minimum of 9 semester hours of coursework in fall and spring terms, including thesis research, is considered a full-time student. During summer terms, 6 semester hours of coursework is considered full-time for biomedical students. Students registered as “Thesis-Only” or “Graduate Fee” are considered full-time. Half-time status is defined as 4.5 hours in fall/spring terms and 3 hours in summer terms.

Part-Time Status. A student registered for fewer hours than the amounts listed for full-time status is considered a part-time student. Each graduate program determines whether it is possible to pursue a degree on a part-time basis. All biomedical graduate students enrolled as part-time are required to register for at least one course or 3 research/project/internship hours in fall and spring terms. All biomedical graduate students enrolled for full-time or part-time study are entitled to full privileges regarding libraries and laboratories, and may have access to Reynolda campus extra-curriculum activities.

Switching Between Full-Time and Part-Time Status. Biomedical graduate students may switch from full-time to part-time status. For additional details, please consult the Graduate Bulletin.

Continuous Enrollment. Degree-seeking students must have continuous enrollment through the semester in which they graduate. Continuous enrollment may be achieved by registering for courses, including research, internship, or project hours, or by registering as Thesis-Only or Graduate Fee as outlined in the previous section under the definitions for Full- or Part-time status.

Thesis-Only Registration Policy. Registration for the Thesis-Only course is restricted and requires permission from the Director of the Graduate School. In order to register for the Thesis-only course, one of two conditions must be met: 1) the student defends the thesis at a point in time that precludes them from being able to have their degree conferred within the current term; requiring a registration in the next term for no reason other than to confer the degree, or 2) the student has advanced to candidacy and leaves the institution with their faculty advisor. In both cases, Thesis-Only is used to allow a student to continue their relationship with the Graduate School, and will be considered continuously enrolled, until their degree can be conferred.

Registration Policy for Continuing Master’s Students. Master’s students on a thesis, project, or internship plan on the Bowman Gray campus who have completed 25 (out of the required 30) credit hours, of which 3 (out of the required 6) are research, project, or internship hours, and have a GPA ≥ 3.0, are permitted to register as a full-time student, but will receive additional tuition scholarship that will lower the student’s cost to be equivalent with the per credit hour rate for 5 credit hours in spring and fall terms. No additional scholarship is applied in summer terms for full-time students. Master’s students on a coursework-only plan who have completed 31 (out of the required 36) credit hours, and have a GPA ≥ 3.0 are also subject to this policy. Continuing Master’s students who fail to complete the described benchmarks, or if the GPA drops below 3.0, will register full-time and are subject to the financial terms described in their original letter of acceptance.
**External Remuneration**

A student supported on a stipend from the Graduate School, faculty grant, student fellowship, or other sources may be allowed to engage in additional remunerative work with written permission from his or her research mentor, provided the work does not delay or interfere with the duties required for timely completion of the degree. A student who receives no support beyond a partial tuition scholarship may engage in outside remunerative work without approval from the Graduate School. All students will be monitored for satisfactory academic progress. Failure to make satisfactory academic progress may result in dismissal from the Graduate School as detailed in the policy on Satisfactory Academic Progress.

**Inventions and Patents**

During a student’s course of study, he or she may participate in research or other work which leads to an invention or discovery. These inventions or discoveries are the property of the University. The University’s Inventions and Patent Policy is applicable to student inventions with respect to the definition of inventions covered, resolution of disputes, and the division of proceeds, including the determination of the inventor(s) share of any proceeds. Under this policy, a program exists to determine patentability and commercial value of each invention. Advice and guidance regarding this policy are available from the Office of Technology Asset Management.

**Copyright**

The Copyright Policy of Wake Forest University is intended to: 1. Encourage research and teaching by rewarding the authors of intellectual works, assisting them in implementing their ideas, and by providing a system for the encouragement of scholarship and creative activity; 2. Serve the public interest by providing means through which intellectual works may be made available to the public; and 3. Protect the rights of the University, its faculty, its staff, and its students with regard to intellectual works developed at the University.
### 2021-2022 ACADEMIC CALENDAR

**BOWMAN GRAY CAMPUS**

#### SUMMER TERM 2021

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<thead>
<tr>
<th>May</th>
<th>20</th>
<th>New Student Orientation</th>
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<tbody>
<tr>
<td>May</td>
<td>24</td>
<td>Classes Begin</td>
</tr>
<tr>
<td>May</td>
<td>31</td>
<td><strong>MEMORIAL DAY HOLIDAY</strong></td>
</tr>
<tr>
<td>June</td>
<td>4</td>
<td>Deadline: Statement of Intent form to Graduate School for September graduates</td>
</tr>
<tr>
<td>June</td>
<td>14</td>
<td>Last day to enroll/add a course</td>
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<tr>
<td>July</td>
<td>5</td>
<td><strong>JULY 4TH HOLIDAY</strong></td>
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<tr>
<td>July</td>
<td>6</td>
<td>Course Registration for the next term opens</td>
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<tr>
<td>August</td>
<td>10</td>
<td>Deadline: Last day to defend for September graduates</td>
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<tr>
<td>August</td>
<td>17</td>
<td>Classes End</td>
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<tr>
<td>August</td>
<td>17</td>
<td>Deadline: ETD Student Advisor Agreement, final copy of thesis/dissertation, exit survey completions for September graduates</td>
</tr>
<tr>
<td>August</td>
<td>18-21</td>
<td>Examinations</td>
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<tr>
<td>August</td>
<td>30</td>
<td>Grades Due</td>
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<tr>
<td>September</td>
<td>7</td>
<td>Graduation</td>
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#### FALL TERM 2021

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<tr>
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<th>New Student Orientation</th>
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<tbody>
<tr>
<td>August</td>
<td>27</td>
<td>Ethics/RCR Bootcamp (GRAD 713)</td>
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<tr>
<td>August</td>
<td>30</td>
<td>Classes Begin</td>
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<tr>
<td>September</td>
<td>6</td>
<td><strong>LABOR DAY HOLIDAY</strong></td>
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<tr>
<td>September</td>
<td>17</td>
<td>Deadline: Statement of Intent form to Graduate School for January graduates</td>
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<tr>
<td>September</td>
<td>20</td>
<td>Last day to enroll/add a course</td>
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<tr>
<td>November</td>
<td>8</td>
<td>Course Registration for the next term opens</td>
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<tr>
<td>November</td>
<td>24 - 26</td>
<td><strong>THANKSGIVING HOLIDAY</strong></td>
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<tr>
<td>December</td>
<td>14</td>
<td>Deadline: Last day to defend for January graduates</td>
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<tr>
<td>December</td>
<td>16</td>
<td>Classes End</td>
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<tr>
<td>December</td>
<td>17-21</td>
<td>Examinations</td>
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<tr>
<td>December</td>
<td>20</td>
<td>Deadline: ETD Student Advisor Agreement, final copy of thesis/dissertation, exit survey completions for January graduates</td>
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<tr>
<td>January</td>
<td>7</td>
<td>Grades Due</td>
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<tr>
<td>January</td>
<td>14</td>
<td>Graduation</td>
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#### SPRING TERM 2022

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<th>New Student Orientation</th>
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<tr>
<td>January</td>
<td>10</td>
<td>Classes begin</td>
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<td>January</td>
<td>17</td>
<td><strong>MARTIN LUTHER KING JR. HOLIDAY</strong></td>
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<td>January</td>
<td>21</td>
<td>Deadline: Statement of Intent form to Graduate School for May graduates</td>
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<td>January</td>
<td>22</td>
<td>Last day to enroll/add a course</td>
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<td>March</td>
<td>7 - 11</td>
<td><strong>SPRING BREAK</strong></td>
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<td>March</td>
<td>21</td>
<td>Course Registration for the next term opens</td>
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<td>April</td>
<td>15</td>
<td><strong>GOOD FRIDAY HOLIDAY</strong></td>
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<td>April</td>
<td>21</td>
<td>Deadline: Last day to defend for May graduates</td>
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<td>April</td>
<td>28</td>
<td>Classes and</td>
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<td>April 29 – May 3</td>
<td>Examinations</td>
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<td>May</td>
<td>3</td>
<td>Deadline: ETD Student Advisor Agreement, final copy of thesis/dissertation, exit survey completions for May graduates</td>
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<tr>
<td>May</td>
<td>9</td>
<td>Grades Due</td>
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<tr>
<td>May</td>
<td>14</td>
<td>Hooding and Awards Ceremony</td>
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<tr>
<td>May</td>
<td>16</td>
<td>Commencement</td>
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7/02/2020
**Physician Assistant Program**

Complete details about this program may be found in the 2021-2022 Physician Assistant Student Handbook and on the web: [www.wakehealth.edu/Physician-Assistant-Program](http://www.wakehealth.edu/Physician-Assistant-Program)

The Wake Forest School of Medicine physician assistant program has a unique history of curricular innovation in medical education. From its beginning in 1969, it has featured inquiry-based, small-group, self-directed learning centered around real patient medical problems. We remain one of the few programs in the country with an educational experience focused on adult and applied learning principles. Our patient-centered approach immerses students in real-life cases and fosters their clinical problem-solving abilities.

**A Future of Innovation in Education**

We are building on our rich history, signature pedagogy, and a collective commitment to leadership development. Our roadmap is built upon shaping excellence in PA education, envisioning the future of PA practice, and creating a generation of future leaders for our profession.

Our goals are focused on our students, our educators and scholars, and the rapidly evolving healthcare environment. Six primary goals guide our program in accomplishing our mission and achieving our vision of excellence:

- Attract the most talented students
- Prepare and inspire the faculty to provide innovative education and training experiences
- Develop a nationally preeminent curriculum and training models to meet tomorrow's workforce needs
- Train professionals to meet future clinical and research workforce needs
- Develop clinical and research training sites to prepare trainees for various work settings and experiences by leveraging internal and external partnerships
- Provide state-of-the-art infrastructure to support our faculty and students

Success is measured in a multidimensional fashion, incorporating evaluations of process, outcomes, and impact. Our benchmark for success is achieved when our students are highly engaged in the learning process, our graduates are both competent and compassionate, our educators are continually improving our instructional process, our scholars are translating new knowledge, and our community is being enriched through the service of our graduates.

**Educational Goals**

- Shape an educational environment that fosters critical thinking, encourages intellectual curiosity, and cultivates professional behaviors and leadership skills
- Create a culture for student advisement and mentoring that nurtures self-awareness, mindfulness, resilience, relationship building, and an appreciation for lifelong learning
- Equip students with a foundational knowledge in biomedical ethics, professionalism, health equity, interprofessional practice, patient-centered communication, and established and evolving biomedical and clinical sciences
- Construct opportunities for students to apply foundational knowledge within a core case-based educational experience integrating biomedical sciences, the optimization of health, and clinical problem solving in which students assume an important role in directing their own learning and cultivate their abilities to function as a team
- Design a competency-based, task-focused curriculum structured around organ systems and the diseases, disorders, and medical assessments physician assistants encounter within those systems
- Apply a constructivist approach by sequencing the curriculum around mechanisms of health and disease, progressing from basic to complex
Technical Standards for Admission, Continuation and Graduation

These technical standards for PA Program admission, continuation and graduation specify the attributes and behaviors essential for successfully completing PA training within a generalist education model at Wake Forest School of Medicine and enabling each graduate to enter clinical practice. Within this document, the terms “applicant” and “candidate” mean an applicant for admission to the PA Program and an enrolled PA student who is a candidate for promotion and graduation.

The Wake Forest School of Medicine PA Program will consider for admission any applicant who meets its academic and nonacademic criteria and who can perform the skills listed in this document, with or without reasonable accommodation consistent with the Americans with Disabilities Act and the Rehabilitation Act. Our institution does not discriminate based on race, color, national origin, religion, sex, age, sexual orientation, gender identity, gender expression, or physical or mental disability and is committed to the full and equitable inclusion of qualified learners.

This policy applies to all PA Program applicants and enrolled PA program students who are candidates for promotion and graduation.

Technical standards for PA Program Admission, Continuation, and Graduation

Students in the PA Program must possess the intellectual, physical and emotional capabilities necessary to undertake the required curriculum in a reasonably independent manner and must be able to achieve the levels of competence required by the faculty. A candidate for the Master of Medical Science (MMS) degree must have abilities and skills in the six functional areas described below.

1. **Observation:** In addition to being able to observe and obtain information from a patient in an encounter, the candidate must be able to observe and obtain information from demonstrations and experiments in the basic sciences.

2. **Communication:** Candidates must be able to communicate effectively and efficiently with classmates, faculty, patients, families and members of the health care team. They must be able to obtain a medical history in a timely fashion, interpret non-verbal aspects of communication, and establish therapeutic relationships with patients. Candidates must be able to record information accurately and clearly and to communicate effectively in English.

3. **Motor:** Students must possess the capacity to perform a physical examination and diagnostic examination and to provide or direct general care and emergency treatment to patients. Performing these examinations requires coordination of both gross and fine muscular movement.

4. **Intellectual, conceptual, integrative and quantitative abilities:** These abilities include measurement, calculation, reasoning, analysis and synthesis. Problem-solving, the critical skill demanded of PAs, requires that a candidate be able to learn, retrieve, analyze, sequence, organize, synthesize and integrate information efficiently and to reason effectively. In addition, the candidate should be able to measure and calculate accurately and to understand the spatial relationships of structures.

5. **Behavioral and social attributes:** Candidates must possess the maturity and emotional health required for full use of their intellectual abilities. They must accept responsibility for learning, exercise good judgment and promptly complete all responsibilities attendant to the diagnosis and care of patients. Candidates must be able to interact effectively, respectfully and professionally with patients, families and health care personnel. They must be able to tolerate taxing workloads and long work hours, function effectively under stress, display flexibility and adapt to changing environments. They must demonstrate regular, punctual attendance for academic and clinical activities. Candidates must be able to contribute to collaborative, constructive learning environments; accept constructive feedback from others; and take responsibility for making appropriate positive changes.

6. **Ethical and legal standards:** Candidates must understand the legal and ethical aspects of the practice of medicine and function within both the law and ethical standards of the medical profession. They must meet the legal standards to be licensed to practice medicine. As such, applicants for admission must acknowledge and provide written explanation of any felony offense or disciplinary action taken against them prior to
matriculation. Students convicted of any felony offense while in PA school should immediately inform the Program Director of the conviction. Failure to disclose prior or new offenses can lead to disciplinary action that may include withdrawal of an offer of admission or dismissal from the PA Program.

**Process for assessing compliance with the technical standards**

By applying to the Wake Forest School of Medicine PA Program and by accepting an offer to matriculate, applicants are attesting that they have read and can meet these technical standards, with or without reasonable accommodations. After admission, students must continue to meet these standards until program completion and during PA school may be asked formally to re-attest that they do so. These standards are not intended to deter any student who might be able to complete the requirements of the curriculum with reasonable accommodations.

**Accommodation for students with disabilities**

1. An applicant or candidate may determine, after review of the technical standards, that they may require reasonable accommodations to successfully complete the program. In this case they should contact the Wake Forest University Center for Learning, Access, and Student Success (CLASS) to confidentially discuss their accommodation needs. The student is responsible for contacting CLASS and should do so as soon as possible after determining that accommodation may be needed. Accommodations are not granted retroactively and may take time to develop and implement; timeliness is essential to maximize the student’s chances to perform well in the curriculum.

2. The determination of whether an accommodation is reasonable is made thoughtfully by CLASS informed by the Department of PA Studies. Reasonable accommodations may include and are not limited to technological adaptations or trained intermediaries, such as interpreters or readers. To be considered a reasonable accommodation, an intermediary may facilitate but may not perform essential skills on behalf of the student. Nor is it permitted to use an intermediary whose powers of selection and observation mediate the student’s judgment. In all cases, a student with accommodations must continue to perform in a reasonably independent manner. For additional information about the process for assessing an applicant’s compliance with technical standards, please contact the Director of Student Services in the Department of PA Studies.

3. For additional information about the process for assessing an applicant’s compliance with technical standards, please contact the Director of Student Services in the Department of PA Studies.

4. For additional information about applying for accommodations, please see the School of Medicine policy Student Disability Accommodations Requests Policy and Procedures.

Please review the full PA Technical Standards Policy in our PolicyTech System.
**Advanced Placement Policy**

**PURPOSE**

The purpose of this policy is to set standards for advanced placement status in the Physician Assistant (PA) program at Wake Forest School of Medicine (WFSM).

**SCOPE**

This policy applies to all prospective and current PA program students.

**DEFINITIONS**

A. **Policy**: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. **WFBH**: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

C. **Advanced Placement**: A waiver of required coursework included in the PA curriculum for applicants to the program and/or a waiver of required coursework included in the PA curriculum for currently enrolled students in the program which results in the student advancing in the curriculum without completing required curriculum components at the sponsoring institution.

**POLICY GUIDELINES**

A. The PA Program does not grant advanced placement outside of the Wake Forest School of Medicine or Graduate School.

**REFERENCES**

ARC-PA Standard A3.16
**Background Check and Health Screening Policy**

All students who enter the Wake Forest School of Medicine PA Program will be required to have a criminal background check completed prior to matriculation.

All students who enter the Wake Forest School of Medicine PA Program will be required to undergo health screenings to be completed prior to matriculation and prior to beginning supervised clinical practice experiences. Additional drug screens or health screenings may be required to address any concerns for meeting technical standards. This may incur additional costs to the student. Conclusions of any health screenings should indicate that the student continues to meet technical standards. If the student does not meet technical standards, this could disrupt the timeline and/or ability of the student to participate in program curriculum.

A signed background check authorization form will be obtained from each applicant who has accepted an offer of admission to the program. The charge for this will be covered by the deposit paid by the student on acceptance to the program. The offer of admission is conditional upon results of the background check and health screening. Additional background checks may be required by specific clinical sites on supervised clinical practice experiences. This may incur additional costs to the student.

The health screenings may include review of required immunizations, color vision screening, Fit Testing, Tb testing, and drug screening.

The criminal background check includes but is not limited to the following:

- a National Sex Offender Registry search
- a determination of areas of residence for the past seven years through a social security number check
- a state and local (county)-level search based on areas of residence for the past seven years for:
  - all levels of criminal offense
    - all types of adjudications
    - all legal processes not yet resolved
    - all types of offenses

Should the background check yield any criminal information, the offer of admission or continued enrollment in the program may be revoked.
**Student Employment Policy**

**PURPOSE**

The purpose of this policy is to establish employment expectations for matriculating students in the Wake Forest School of Medicine Physician Assistant (PA) Program.

**SCOPE**

This policy applies to all Wake Forest School of Medicine PA Program students.

**DEFINITIONS**

A. **Policy**: A statement of principle that is developed for the purpose of guiding decisions and activities related to governance, administration, or management of care, treatment, services or other activities. A policy may help to ensure compliance with applicable laws and regulations, promote one or more missions, contain guidelines for governance, and set parameters within which faculty, staff, students, visitors, and others are expected to operate.

B. **WFBH**: Wake Forest Baptist Health (WFBH) is a health system that includes Wake Forest Baptist Medical Center and all affiliated organizations including Wake Forest University Health Sciences (WFUHS), North Carolina Baptist Hospital (NCBH), Lexington Medical Center (LMC), Davie Medical Center (DMC), Wilkes Medical Center (WMC), High Point Medical Center (HPMC), Wake Forest Baptist Imaging, LLC (WFBI), NCBH Outpatient Endoscopy, Wake Forest Health Network (WFHN), and Premier Surgery Center.

**POLICY GUIDELINES**

A. Students must not work, substitute, or function as instructional faculty, clinical staff, or administrative staff in the Wake Forest School of Medicine PA Program itself, or in any instructional sites, to include clinical rotation sites where a student is placed.

B. Due to the rigorous nature of the curriculum, employment during the period of matriculation is highly discouraged.

**REFERENCES**

ARC-PA Standards A3.04, A3.05, A3.15(e)
## PA Program Resources

### Academic calendar_PA2022

#### Pre-Clinical Year

<table>
<thead>
<tr>
<th>Semester</th>
<th>Event</th>
<th>Dates</th>
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</thead>
<tbody>
<tr>
<td>I</td>
<td>WS Housing for Boone Cohort Opens</td>
<td>May 26, 2020</td>
</tr>
<tr>
<td></td>
<td>Program Orientation</td>
<td>May 27-29, 2020</td>
</tr>
<tr>
<td></td>
<td>Unit 1 Begins</td>
<td>June 1, 2020</td>
</tr>
<tr>
<td></td>
<td>Unit 1 Final Examinations</td>
<td>June 25, 2020</td>
</tr>
<tr>
<td></td>
<td>Course Orientation</td>
<td>June 29-30, 2020</td>
</tr>
<tr>
<td></td>
<td>Boone Campus Move In Day</td>
<td>July 1, 2020</td>
</tr>
<tr>
<td></td>
<td>Boone Campus Orientation</td>
<td>July 2, 2020</td>
</tr>
<tr>
<td></td>
<td>July 4th Holiday (observed)</td>
<td>July 3, 2020</td>
</tr>
<tr>
<td></td>
<td>Unit 2 Begins</td>
<td>July 6, 2020</td>
</tr>
<tr>
<td></td>
<td>Unit 2 Final Examinations</td>
<td>August 31 - September 4, 2020</td>
</tr>
<tr>
<td></td>
<td>Labor Day Holiday No Classes</td>
<td>September 7, 2020</td>
</tr>
<tr>
<td></td>
<td>September Break-No Classes</td>
<td>September 8-11, 2020</td>
</tr>
<tr>
<td>II</td>
<td>Unit 3 Begins</td>
<td>September 14, 2020</td>
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<tr>
<td></td>
<td>Mid-Unit Examinations</td>
<td>November 2-3, 2020</td>
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<td></td>
<td>Fall Break</td>
<td>November 4-6, 2020</td>
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<tr>
<td></td>
<td>Thanksgiving Holiday-No Classes</td>
<td>November 25-27, 2020</td>
</tr>
<tr>
<td></td>
<td>Unit 3 Final Exams</td>
<td>December 14-18, 2020</td>
</tr>
<tr>
<td></td>
<td>Winter Break-No classes</td>
<td>December 21, 2020-January 1, 2021</td>
</tr>
<tr>
<td>III</td>
<td>Unit 4 Begins</td>
<td>January 4, 2021</td>
</tr>
<tr>
<td></td>
<td>Martin Luther King Holiday-No Classes</td>
<td>January 20, 2021</td>
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<tr>
<td></td>
<td>Unit 4 Final Examinations</td>
<td>March 8-12, 2021</td>
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<tr>
<td></td>
<td>March Break-No Classes</td>
<td>March 15-19, 2021</td>
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<tr>
<td></td>
<td>Unit 5 Begins</td>
<td>March 22, 2021</td>
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<tr>
<td></td>
<td>Unit 5 Evaluation Week</td>
<td>May 10-14, 2021</td>
</tr>
<tr>
<td></td>
<td>PreClinical Year Ends</td>
<td>May 14, 2021</td>
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#### Clinical Year*

<table>
<thead>
<tr>
<th>Semester</th>
<th>Event</th>
<th>Dates</th>
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</thead>
<tbody>
<tr>
<td>IV</td>
<td>Clinical Year Prep Begins</td>
<td>May 17, 2021</td>
</tr>
<tr>
<td></td>
<td>No Classes Hold for AAPA Travel</td>
<td>May 21, 2021</td>
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<tr>
<td></td>
<td>AAPA Annual Conference</td>
<td>May 22-26, 2021</td>
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<tr>
<td></td>
<td>Break Week</td>
<td>May 24-28, 2021</td>
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<tr>
<td></td>
<td>WS Housing for Boone Cohort Opens</td>
<td>May 31, 2021</td>
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<tr>
<td></td>
<td>Memorial Day Holiday</td>
<td>May 31, 2021</td>
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<tr>
<td></td>
<td>Clinical Year Prep Ends</td>
<td>June 25, 2021</td>
</tr>
<tr>
<td></td>
<td>White Coat Ceremony</td>
<td>June 25, 2021</td>
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</tbody>
</table>

*Specific dates for rotations and callbacks within the clinical year are to be determined.*
➢ Academic calendar_PA2023

Pre-Clinical Year

<table>
<thead>
<tr>
<th>Semester</th>
<th>Event</th>
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<tr>
<td>I</td>
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<td>June 1, 2021</td>
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<tr>
<td></td>
<td>Program Orientation I</td>
<td>June 2-3, 2021</td>
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<tr>
<td></td>
<td><strong>Unit 1 Begins</strong></td>
<td>June 4, 2021</td>
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<tr>
<td></td>
<td>Unit 1 Final Examinations</td>
<td>June 30, 2021</td>
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<tr>
<td></td>
<td>Program Orientation II/Unit 2 Orientation</td>
<td>July 1 – July 2(a.m.), 2021</td>
</tr>
<tr>
<td></td>
<td>Boone Campus Move-Out</td>
<td>July 2, 2021 (p.m.)</td>
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<td>July 4th Holiday (observed)</td>
<td>July 5, 2021</td>
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<tr>
<td></td>
<td>Boone Campus Orientation</td>
<td>July 6, 2021 (a.m.)</td>
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<tr>
<td></td>
<td><strong>Unit 2 Begins</strong></td>
<td>July 6, 2021 (p.m.)</td>
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<tr>
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<td>August 30-September 3, 2021</td>
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<td>Labor Day Holiday No Classes</td>
<td>September 6, 2021</td>
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<td>September Break-No Classes</td>
<td>September 7-10, 2021</td>
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<tr>
<td>II</td>
<td><strong>Unit 3 Begins</strong></td>
<td>September 13, 2021</td>
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<td>Mid-Unit Examinations</td>
<td>Oct. 25-26</td>
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<td>Fall Break</td>
<td>Oct. 27-29</td>
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<td>Unit 5 Evaluation Week</td>
<td>May 9-13, 2022</td>
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<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td>White Coat Ceremony</td>
<td>June 24, 2022</td>
</tr>
<tr>
<td></td>
<td>Graduation</td>
<td>May 15, 2023</td>
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</tbody>
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Academic Nursing Programs

Nurse Anesthesia

Complete details about this program may be found in the 2021-2022 Nurse Anesthesia Student Handbook and on the web: www.wakehealth.edu/Nurse-Anesthesia-Program

The Nurse Anesthesia Program was established in 1942 as one of the professional schools of The North Carolina Baptist Hospital (NCBH) and the Bowman Gray School of Medicine. Since then, Wake Forest Baptist Health has served as the program’s sponsor and the major clinical facility for clinical education of our students. Currently, the program is one of an elite minority of programs which are housed in a school of medicine. Program graduates are awarded the Master of Science in Nurse Anesthesia degree by the Wake Forest School of Medicine. Beginning in 2023, graduates will be awarded a Doctor of Nursing Practice degree. For over 74 years, the nurse anesthesia program has been highly regarded for an exceptional quality of graduates, as well as for housing faculty of outstanding achievement and recognition, nationally and internationally. The program offers high quality education and experience to a select group of professional nurses to prepare graduates for a life-long study and practice of anesthesia. The program strives to maintain a top-ranked position through the provision of a rigorous education and program evolution to capitalize upon emerging trends in health care and education. Our program is renowned for a legacy of leadership development with our graduates serving in or having occupied the highest positions of state, national, and international nurse anesthesia organizations. Our students are privileged to be educated by professional advocates who have held positions of prominence in our profession. We provide a rigorous education which leads graduates to embody passion for the art of anesthesia nursing, commitment to professionalism, and stewardship of the profession. Our unique combination of longstanding history and a current, progressive approach is embodied in our tagline “Established Excellence, Innovative Education”.
Technical Standards for Admission, Continuation and Graduation

Applicants to the Wake Forest Nurse Anesthesia Program are selected on the basis of their academic, personal and extracurricular attributes. Applicants must also have the intellectual, physical and emotional capabilities to meet the requirements of the School’s curriculum and to function as a safe anesthesia provider.

The following technical standard guidelines are based on those recognized as essential to the study and practice of nurse anesthesia. These guidelines specify the attributes considered essential for completing nurse anesthesia training and for enabling each graduate to enter clinical practice. Because these standards describe the essential functions that students must demonstrate to meet the requirements of nurse anesthesia training, they are prerequisites for admission, continuation, and graduation.

Wake Forest Nurse Anesthesia Program will consider for admission any applicant who meets its academic and nonacademic criteria and who demonstrates the ability to perform skills listed in this document, with or without reasonable accommodations, consistent with the Americans with Disabilities Act and the Rehabilitation Act. Our institution is committed to considering all qualified applicants without discrimination on the basis of race, color, religion, national origin, age, sex, veteran status, disability or sexual orientation. The Admissions Committee believes that all students must possess the intellectual, physical and emotional capabilities necessary to undertake the required curriculum in a reasonably independent manner without having to rely on intermediaries, and that all students must be able to achieve the levels of competence required by the program goals and objectives. All candidates for admission, both those with and without disabilities, are expected to be competitive with others in the applicant pool in academic, personal and extracurricular attributes. The institutional policy is to make admissions decisions on the basis of each applicant’s qualifications for the study and practice of nurse anesthesia. The School of Nurse Anesthesia’s commitment to nondiscrimination against any applicant or admitted student on the basis of disability is consistent with applicable law.

Admitted students with documented, qualified disabilities have access to support personnel within the Office of Student Services. An agent of this office will collaborate with other faculty and staff as necessary to provide reasonable accommodations for courses and examinations. The goal is to help students with qualified disabilities find access to the necessary resources to assist them in meeting the technical standards for nurse anesthesia program admission, continuation and graduation.

Requests for accommodation of a disability must be made in a timely manner to the Director of the Nurse Anesthesia Program and the Office of Student Services. At that time, the following information must be provided at the student’s expense:

1. Documentation of the disability from a licensed professional.
2. The diagnosis of the disability using standard nomenclature.
3. A description of the student’s functional limitations due to the disability.
4. Copies of the evaluation report(s) on or accompanied by a letter on the evaluating professional’s letterhead.
5. A description of the requested accommodation.

Accommodations that may be appropriate will depend on individual circumstances. In evaluating a request for an accommodation, the School of Nurse Anesthesia will take into account the individual’s specific limitations and needs to determine whether the requested accommodation is reasonable and will permit the applicant or student to satisfy the Technical Standards. An accommodation is not reasonable if it poses a direct threat to the health or safety of self and/or others, if making it requires a substantial modification in an essential element of the curriculum, if it lowers academic standards, or poses an undue administrative or financial burden. As mentioned above, except in rare circumstances, the use by a student of an intermediary to perform any of the functions described in the Technical Standards would constitute an unacceptable substantial modification.

For students seeking accommodations, a comprehensive neuropsychological evaluation conducted by a qualified professional must be provided. The evaluation must appear on, or be accompanied by a letter on, the evaluating professional’s letterhead.
Technical Standards for Nurse Anesthesia Studies Required for Admission, Continuation and Graduation

A candidate for the Master of Science in Nurse Anesthesia must be able to demonstrate intellectual-conceptual, integrative and quantitative abilities; skills in observation, communication and motor functions; and mature behavioral and social attributes. Technological compensation can be made for some disabilities in certain areas, but a candidate should be able to perform in a reasonably independent manner without a trained intermediary. The use of a trained intermediary means that a candidate’s judgment or performance must be mediated by someone else’s power of selection, observation, or performance.

Sensory
- A candidate must be able to detect and interpret changes in monitoring alarms and equipment.
- A candidate must have sufficient sensory capacity to observe in the lecture hall, the laboratory, the outpatient setting, and the patient’s bedside.
- Sensory skills adequate to perform a physical examination are required. Functional vision, hearing and tactile sensation must be adequate to observe a patient's condition and to elicit information from computerized monitors, and through procedures regularly required in a physical examination, such as inspection, auscultation and palpation.
- A candidate must be able to observe a patient accurately at a distance and close at hand.

Communication
- A candidate should be able to speak, hear and observe patients in order to elicit information; describe changes in mood, activity, and posture; and perceive nonverbal communications.
- A candidate must be able to communicate effectively and sensitively with patients. Communication includes speech, as well as reading and writing.
- A candidate must be able to communicate effectively via oral and written modalities interacting with all members of the health care team.

Motor
- Candidates should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion and other diagnostic maneuvers.
- A candidate must be able to negotiate patient care environments and must be able to move self/patients between settings, such as clinic, classroom building, and hospital.
- A candidate should be able to execute motor activities reasonably required to provide general care, to perform direct laryngoscopy, arterial and venous line placement, and performance of peripheral and central nerve blocks, anesthesia gas machine operation and troubleshooting, and to provide emergency and urgent treatment to patients such as fiber optic intubation and therapies of the difficult airway algorithm.
- Examples of emergency treatment reasonably required of a nurse anesthetist are cardiopulmonary resuscitation (CPR) and the administration of intravenous medication. Such actions require coordination of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision.

Intellectual-Conceptual, Integrative and Quantitative Abilities
- Intellectual-conceptual, integrative and quantitative abilities include measurement, calculation, reasoning, analysis and synthesis. Problem-solving, the critical skill demanded of a nurse anesthetist, requires all of these intellectual abilities.
- A candidate should be able to comprehend 3-dimensional relationships and to understand the spatial relationships of structures for the performance of peripheral and central nerve blocks.
- A candidate must be able to read and understand medical and nursing literature. In order to complete the degree, candidates must be able to demonstrate mastery of these skills and the ability to use them together in a timely and often critical fashion in problem-solving and patient care.
Behavioral and Social Attributes

- A candidate must possess the emotional health required for full utilization of intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients and other healthcare personnel.
- A candidate must be able to tolerate physically taxing workloads and to function effectively under stress. They must be able to adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients.
- Commitment to excellence, service orientation, goal-setting skills, academic ability, self-awareness, integrity and interpersonal skills are all personal qualities that are assessed during the admission and education process. Because the nature of nurse anesthesia education is based on a mentoring process, candidates are expected to be able to accept criticism and respond by appropriate modification of behavior. Compassion, integrity, concern for others, interpersonal skills, interest and motivations are all personal qualities that are required.

Annotations to the Technical Standards

In addition to the existing text incorporated within the Technical Standards for Nurse Anesthesia Studies for Admission, Continuation and Graduation, there are specific needs that are relevant to successful completion of curriculum requirements. This addendum provides specific examples to enhance the interpretation of the Technical Standards, particularly within the “Motor” and “Behavioral and Social Attributes” categories.

- Students are required to master the skills of a complete physical examination.
- They must complete Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), Pediatric Advanced Cardiac Life Support (PALS) and Neonatal Resuscitation Program (NRP) instruction and certification processes.
- Students must be available to meet when sessions are available for the mastery of the curriculum objectives. This may include evening, night and weekend obligations.
- During the clinical internship, several mandatory rotations require extended hours, with start times as early as 5:00 am. Evening, on-call and weekend shifts are common and may extend into 12 to 16 hour days. As a result, students must be able to physically and psychologically perform capably and competently with moderate degrees of sleep deprivation.
- Many surgical procedures essential to training may last for 3 or more hours. Students may be required to stand in a relatively fixed position for the entirety of the procedure with minimal rest or breaks.
- In emergency situations, patients may need to be moved, turned or resuscitated, and the student may be in situations that necessitate short periods of bending, lifting or partial lifting, reaching, squatting or straining.
- Within WFBH rotations, students may be required to cover large areas of space (different patient-care floors, different wings or sections within institutional building structures). They must be able to transport themselves and patients from one location to another in a timely fashion in order to facilitate patient care responsibilities and to receive educational training, such as during rounds.
- Students are responsible to ensure that they arrive fit for duty, which is defined as being in sound emotional, physical, and mental health to provide safe anesthesia care. Students are required to update the program on changes in their health status (including medications) which may impact their vigilance, alertness, or ability to provide safe patient care. The presence of communicable disease (such as HIV or Hepatitis) may impair the student’s ability to provide safe care, and the program abides by NC law and the School of Medicine policy on the Effects of Infectious Disease or Disability on Student Learning Activities. Students infected with a communicable disease should consult with the program director to ensure that they are able to safely care for patients.
Doctor of Nursing Practice

Complete details about this program may be found in the 2021-2022 DNP Student Handbook and on the web: http://www.wakehealth.edu/Doctor-of-Nursing-Practice.htm

Wake Forest School of Medicine has a long tradition of excellence in creating nursing leaders. The department that has offered a distinguished advanced practice nursing program for 75 years, now offers a Doctor of Nursing Practice degree (DNP). With the convention of established excellent and innovative education, the online post-master’s DNP program at Wake Forest School of Medicine prepares the next generation of nurse leaders, expanding nursing roles in practice, management, and education. The DNP program builds on the nursing master’s degree, providing doctoral-level content in healthcare law, organizational systems management, policy, translation and implementation research, population health, and nursing informatics. Ingrained in interprofessional and intraprofessional collaboration, this unique nursing program housed within a school of medicine offers an unrivaled degree. Partnering with the Wake Forest University School of Law, DNP students will take elective credits in healthcare law. The post-master’s DNP program is a part-time, two-year online program for registered nurses seeking to assume greater leadership and advanced clinical roles that will translate evidence into practice, evaluate clinical outcomes and improve models of healthcare delivery. Through life-long learning, graduates will lead the future of nursing by advancing best practice. Program graduates are awarded the Doctor of Nursing Practice (DNP) degree by the Wake Forest School of Medicine.

Academic Nursing Program Academic Calendar

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<th>FALL</th>
<th>2021</th>
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<tr>
<td>First Day</td>
<td>8/16</td>
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<tr>
<td>Orientation/On site coursework</td>
<td>8/18-8/20</td>
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<td>Labor Day</td>
<td>9/6</td>
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<tr>
<td>Thanksgiving</td>
<td>11/24-11/28</td>
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<td>Last Day</td>
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<tr>
<th>SPRING</th>
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<tbody>
<tr>
<td>First Day</td>
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<tr>
<td>MLK</td>
<td>1/17</td>
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<tr>
<td>Spring Break</td>
<td>4/11-4/17</td>
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<td>Easter Holiday</td>
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<td>Last Day</td>
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<tr>
<th>SUMMER</th>
<th>2022</th>
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<tbody>
<tr>
<td>First Day</td>
<td>5/9</td>
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<tr>
<td>Memorial Day</td>
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<td>Independence Day</td>
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<td>Last Day</td>
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<tr>
<td>Project Presentation and Graduation</td>
<td>8/19-8/21</td>
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